

Personal - Post agency
activity

SECRET

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 26 FEBRUARY 1970	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, BARTHELEME N. JR.			
3. NATURE OF PERSONNEL ACTION RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 28 70		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS X VIO C O TO V C TO C		7. FINANCIAL ANALYSIS NO. CHARGEABLE 0235 0620		8. LEGAL AUTHORITY (Completed by Office of Personnel) PL 86-363 Sec. 231	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 PANAMA SECTION		10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1318		13. CAREER SERVICE DESIGNATION D.	
14. CLASSIFICATION SCHEDULE (GS, ES, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 5	
17. SALARY OR RATE \$15,173					
18. REMARKS <p>SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970.</p> <p>NOT Recommended in Agency Reserve Program due to Health & Financial for B. Dulausk W.H/PAS</p> <p>1 - FINANCE</p>					
19A. SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD, C/WH/PERS		DATE SIGNED 26 FEB 70		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul M. Y. [Signature] 27 FEB 70	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 45	20. EMPLOY CODE 10	21. DATES CODING NUMERIC ALPHABETIC	22. SENIOR CODE	23. INTEGRITY CODE	24. POSTERS CODE 1
25. DATE OF BIRTH MO DA YR 05 27 19	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR			
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE - CSC - OSGN - FICA - NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. FORFEITURE CANCELLATION DATA TYPE MO DA YR	33. SECURITY REG NO
34. NET PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	35. SERV COMP DATE MO DA YR	36. LONG COMP DATE MO DA YR	37. CAREER CATEGORY CODE 1 - YES 2 - NO	38. LEGAL HEALTH INSURANCE CODE 0 - WAIVER 1 - YES	39. SOCIAL SECURITY NO
40. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YEARS) 3 - BREAK IN SERVICE (MORE THAN 3 YEARS)	41. LEAVE CAT CODE	42. FORM EXECUTED CODE 1 - YES 2 - NO	43. FEDERAL TAX DATA CODE NO TAX EXEMPTIONS	44. STATE TAX DATA CODE NO TAX EXEMPTIONS	45. DATE APPROVED 3/1/70
46. POSITION CONTROL CERTIFICATION 02-04-10 APR [Signature]					47. DATE APPROVED 3/1/70

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND DECLASSIFICATION

SECRET

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE

(Date)

FOR THE FOLLOWING REASON

MAR 2 10 20 AM '70

MY LAST WORKING DAY WILL BE

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

403 Shiner Rock Rd.
Richville, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a } The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular
Part Time
Temporary
Temporary-Part Time

Summer
Detail-Out
Detail-In

WAE
Consultant
Military

Item 9 - "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

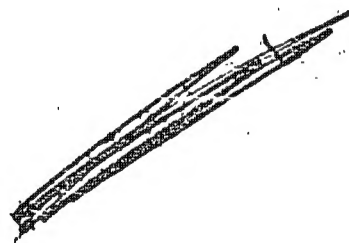
FIRST LINE
Major Component (Director, Deputy Director, etc.)
Office, Major Staff, etc.
Foreign Field or U.S. Field (if pertinent)
Division or Staff (subordinate to first line)
Branch
Section
Unit

Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the *gaining* Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING- The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET



MEDICAL

2 JUL 1969

MEMORANDUM FOR: Mr. Balme N. Hidalgo, Jr.

SUBJECT : Exceptional Service Emblem

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert C. Wattles
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BSD/HMAB

SECRET

24 June 1969

MEMORANDUM FOR: Baltes E. Hidalgo

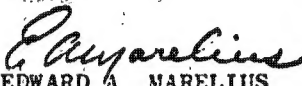
VIA : WA/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.


EDWARD A. MARELIUS
DDP Records Management Officer

cc: Personnel File of Addressee

SECRET

GROUP I
Excluded from automatic
downgrading and
declassification

SENSITIVE OPERATIONAL
1968

SECRET

G 38

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
				10 August 1966	
1. SERIAL NUMBER		2. NAME (Last - First - Middle)			
027630		HIDALGO, EMMANUEL N., JR.			
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED	
DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM				MONTH DAY YEAR 06 14 66	
5. CATEGORY OF EMPLOYMENT				6. LEGAL AUTHORITY (Completed by Office of Personnel)	
REGULAR				PL 88-643 Sect. 203	
7. FUNDS		8. COST CENTER NO. CHARGE		9. ORGANIZATIONAL DESIGNATIONS	
X V TO V		7235-0620		DDP/WH	
C TO V		10. LOCATION OF OFFICIAL STATION		WASHINGTON, D.C.	
C TO C		11. POSITION TITLE		12. POSITION NUMBER	
				D	
13. CLASSIFICATION SCHEDULE (GS, FS, AS)		14. OCCUPATIONAL SERIES		15. GRADE AND STEP	
				12	
16. REMARKS		17. SALARY OR RATE			
YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.		s			
18A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
				DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRATE CODE	24. MOOTED CODE
		NUMERIC ALPHABETIC			
25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	28. RTR EXP-RES	29. SPECIAL REFERENCE	30. RETIREMENT DATA
MO. DA. YR.	MO. DA. YR.	MO. DA. YR.	MO. DA. YR.	1-ISC 2-TFLR 3-NONE	CODE 2
31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA	33. SECURITY REQ NO	34. SIZ	35. VET PREFERENCE	36. SERV COMP DATE
TYPE	MO. DA. YR.			CODE	MO. DA. YR.
37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGLI HEALTH INSURANCE	40. SOCIAL SECURITY NO	41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE
MO. DA. YR.	CODE	CODE		CODE	CODE
43. POSITION CONTROL CERTIFICATION	44. O P APPROVAL	45. DATE APPROVED	46. FEDERAL TAX DATA	47. STATE TAX DATA	48. SOCIAL SECURITY NO
CODE	See memo signed by D/Pers dated 26 JUL 1966		CODE	CODE	CODE
49. POSITION CONTROL CERTIFICATION	50. O P APPROVAL	51. DATE APPROVED	52. FEDERAL TAX DATA	53. STATE TAX DATA	54. SOCIAL SECURITY NO
CODE			CODE	CODE	CODE

1152
3-7-66

USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED:	
1. SERIAL NUMBER 027630										10 DECEMBER 1965	
2. NAME (Last-First-Middle) HIDALGO, BAYLES N.											
3. NATURE OF PERSONNEL ACTION REASSIGNMENT					4. EFFECTIVE DATE REQUESTED MO. DAY YEAR DEC 19 65			5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS I					7. CENTER NO. CHARGE 6235 - 0620			8. LEGAL AUTHORITY (If employed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DOP/WH BRANCH 2 PANAMA SECTION					10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.						
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER (GS-12) 1318			13. CAREER/SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (G.S. 18, etc.) GS					15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 12 -2			
17. SALARY OR RATE \$ -10,987											
18. REMARKS FROM: WH/C/MIAMI OPS BR/FT SECTION/5235 - 1162/1145/WASHINGTON, D. C.											
<div style="float: right; border: 1px solid black; padding: 5px;">Recorded by CSPD <i>Sgt</i></div>											
19. SIGNATURE OF REQUESTING OFFICIAL ROBERT D. CASHMAN C/WH/PERSONNEL											
DATE SIGNED: 12 DEC 65											
20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>											
DATE SIGNED: 12 DEC 65											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE 57		22. EMPLOY CODE 11		23. OFFICE CODING NUMERIC ALPHABETIC 57370 WH 1318		24. INTEGRAL CODE		25. DATE OF BIRTH MO. DA. YR.		26. DATE OF GRADE MO. DA. YR.	
27. DATE OF LIT MO. DA. YR.		28. SPECIAL REFERENCE 1-CSC 2-FICA 3-ROSE		29. RETIREMENT DATA CODE		30. SEPARATION DATA CODE		31. CORRECTION CANCELLATION DATA MO. DA. YR.		32. SECURITY REG. NO.	
33. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		34. SERV COMP DATE MO. DA. YR.		35. LONG COMP DATE MO. DA. YR.		36. CAREER CATEGORY CODE 1-CAR RES 2-PROV TEMP		37. FEDERAL TAX DATA CODE 1-YES 2-NO		38. STATE TAX DATA CODE 1-YES 2-NO	
39. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS SERVICE 2-BEARS IN SERVICE (LESS THAN 3 YEARS) 3-BEARS IN SERVICE (MORE THAN 3 YEARS)		40. LEAVE EXT CODE		41. FEDERAL TAX DATA CODE 1-YES 2-NO		42. STATE TAX DATA CODE 1-YES 2-NO		43. SOCIAL SECURITY NO.		44. STATE CODE	
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i> 12/15/65											

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

CONFIDENTIAL
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE		<input checked="" type="checkbox"/> VOUCHERED
		<input type="checkbox"/> UNVOUCHERED
NAME (Last, First, Middle)		SERIAL NUMBER
HIDALGO B N Jr		027630
OFFICE (and Division)		
DDP/WH		
<input type="checkbox"/> ORIGINAL	LONGEVITY COMPUTATION DATE	
<input checked="" type="checkbox"/> CORRECTION	02-15-52	
THIS DATE	SIGNATURE (Office of Personnel)	
12-13-65	[Signature]	

FORM 171a
11-58

CONFIDENTIAL

(4)

Approved by

1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

P.A. Bonaventura Ltd

1152 USE PREVIOUS EDITION

GROUP 1
Excluded from automatic downgrading
and declassification

SECRET

18 Nov 1964

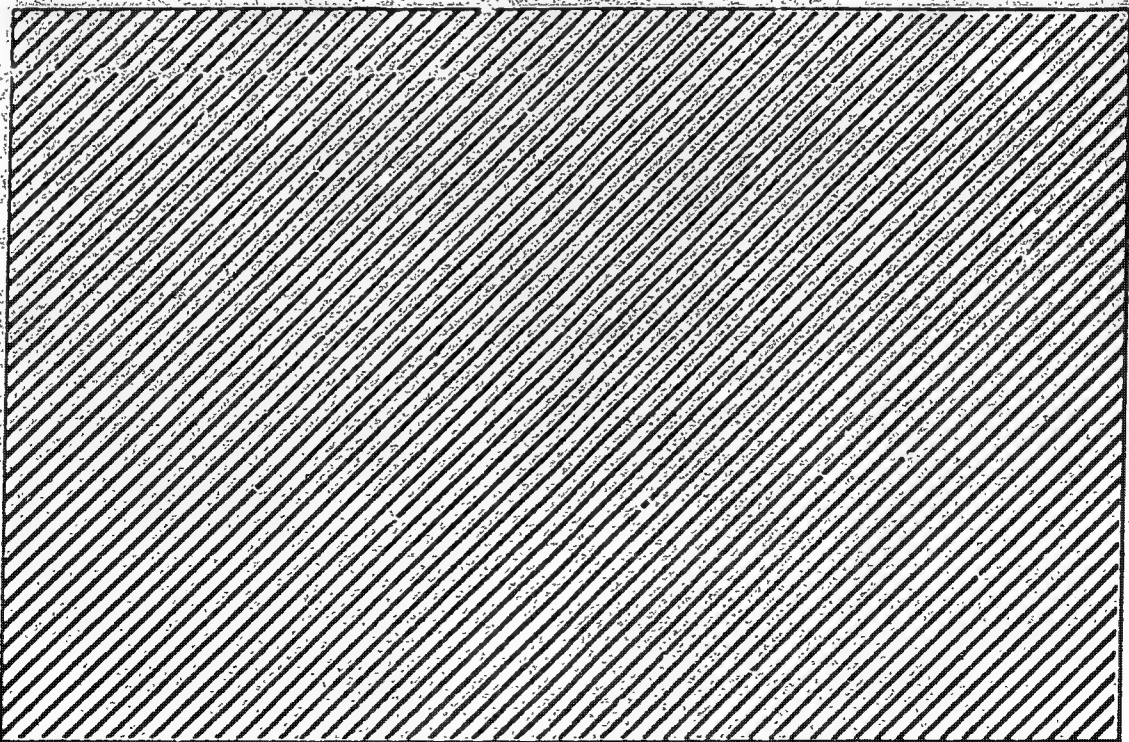
REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) [REDACTED]		3. DATE PREPARED 9 April 1964	
4. NATURE OF PERSONNEL ACTION Promotion		5. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 01 64		6. CATEGORY OF EMPLOYMENT Regular	
7. FUNDS V TO V O TO V		8. COST CENTER NO. CHARGE 4102-2001-170		9. LEGAL AUTHORITY (Completed by Office of Personnel)	
10. ORGANIZATIONAL DESIGNATIONS DDP/Operational Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section		11. LOCATION OF OFFICIAL STATION JMWAVE			
12. POSITION TITLE OPS OFFICER		13. POSITION NUMBER 003		14. CAREER SERVICE DESIGNATION 2	
15. CLASSIFICATION SCHEDULE / GS / B. / etc. GS		16. OCCUPATIONAL SERIES 0135.01		17. GRADE AND STEP 12 (1)	
18. SALARY OR RATE \$ 0000		19. REMARKS 1 by Security 1 by Payroll			
20. SIGNATURE OF REQUESTING OFFICIAL [Signature]		21. DATE SIGNED 9 April 64		22. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
23. DATE SIGNED 12 April 64		24. DATE SIGNED 12 April 64			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
25. ACTION CODE 45	26. EMPLOY CODE 10	27. OFFICE CODING NUMERIC ALPHABETIC	28. STATION CODE	29. INTEGREE CODE	30. RIGHTS CODE
31. DATE OF BIRTH MO DA YR 05 07 19	32. DATE OF GRADE MO DA YR	33. DATE OF LEI MO DA YR	34. DATE OF LEI MO DA YR	35. DATE OF LEI MO DA YR	36. DATE OF LEI MO DA YR
37. NTE EXPIRES MO DA YR	38. SPECIAL REFERENCE 1-CR 2-FLA 3-NONE	39. RETIREMENT DATA CODE	40. SEPARATION DATA CODE TYPE	41. CORRECTION CANCELLATION DATA MO DA YR	42. SECURITY REQ NO
43. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	44. SERV COMP DATE MO DA YR	45. LONG COMP DATE MO DA YR	46. CAREER CATEGORY CAR RES PROV TEMP	47. FEGLI HEALTH INSURANCE CODE 0-NONE 1-YES	48. SOCIAL SECURITY NO
49. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS SERVICE 2-BRIEF IN SERVICE (1 TO 3 YEARS) 3-BRIEF IN SERVICE (MORE THAN 3 YEARS)	50. LEAVE CAT CODE	51. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	52. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	53. STATE TAX DATA CODE MC TAX STATE CODE	54. STATE TAX DATA CODE
55. POSITION CONTROL CERTIFICATION [Signature]		56. DATE APPROVED [Signature]		57. DATE APPROVED [Signature]	

FORM 1152 USE PREVIOUS EDITION

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
HIDALGO, BALMES N.	self	60-264

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 30 May 1963. Broken left foot.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF REPRESENTATIVE
	<i>B. De Felice</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 18 April 1963	
1. SERIAL NUMBER 04768		2. NAME (Last, First, Middle) [REDACTED]				3. DATE PREPARED	
4. NATURE OF PERSONNEL ACTION EXCITED APPOINTMENT				5. EFFECTIVE DATE REQUESTED 04 28 63		6. CATEGORY OF EMPLOYMENT REGULAR	
7. FUNDS CF TO V		8. V TO V CF TO V		9. COST CENTER NO. CHARGE 3132-2001-1000		10. LEGAL AUTHORITY (Completed by Office of Personnel)	
11. ORGANIZATIONAL DESIGNATIONS DDP/Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				12. LOCATION OF OFFICIAL STATION JMWAVE			
13. POSITION TITLE OPS OFFICER				14. POSITION NUMBER 0732		15. CAREER SERVICE DESIGNATION D	
16. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		17. OCCUPATIONAL SERIES 0136.01		18. GRADE AND STEP 11 (4)		19. SALARY OR RATE \$ 8840	
20. REMARKS <div style="text-align: center; font-size: 2em; font-family: cursive;">P - 359</div> <div style="float: right; border: 1px solid black; padding: 5px; transform: rotate(-5deg);">Recorded by CSPD <i>[Signature]</i></div>							
21. SIGNATURE OF REQUESTING OFFICIAL Louis W. Armstrong, C/SAS/Ref.				22. DATE SIGNED 18 Apr 63		23. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [REDACTED]	
24. DATE SIGNED 11 Apr 63							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
25. BIRTH DATE 13 10		26. OFFICE CODE 61770 SAS		27. STATION CODE 9449		28. DATE OF BIRTH 25 27 19	
29. DATE OF BIRTH 25 27 19		30. DATE OF BIRTH 25 27 19		31. DATE OF BIRTH 25 27 19		32. DATE OF BIRTH 25 27 19	
33. DATE OF BIRTH 25 27 19		34. DATE OF BIRTH 25 27 19		35. DATE OF BIRTH 25 27 19		36. DATE OF BIRTH 25 27 19	
37. DATE OF BIRTH 25 27 19		38. DATE OF BIRTH 25 27 19		39. DATE OF BIRTH 25 27 19		40. DATE OF BIRTH 25 27 19	
41. DATE OF BIRTH 25 27 19		42. DATE OF BIRTH 25 27 19		43. DATE OF BIRTH 25 27 19		44. DATE OF BIRTH 25 27 19	
45. DATE OF BIRTH 25 27 19		46. DATE OF BIRTH 25 27 19		47. DATE OF BIRTH 25 27 19		48. DATE OF BIRTH 25 27 19	
49. DATE OF BIRTH 25 27 19		50. DATE OF BIRTH 25 27 19		51. DATE OF BIRTH 25 27 19		52. DATE OF BIRTH 25 27 19	
53. DATE OF BIRTH 25 27 19		54. DATE OF BIRTH 25 27 19		55. DATE OF BIRTH 25 27 19		56. DATE OF BIRTH 25 27 19	
57. DATE OF BIRTH 25 27 19		58. DATE OF BIRTH 25 27 19		59. DATE OF BIRTH 25 27 19		60. DATE OF BIRTH 25 27 19	
61. DATE OF BIRTH 25 27 19		62. DATE OF BIRTH 25 27 19		63. DATE OF BIRTH 25 27 19		64. DATE OF BIRTH 25 27 19	
65. DATE OF BIRTH 25 27 19		66. DATE OF BIRTH 25 27 19		67. DATE OF BIRTH 25 27 19		68. DATE OF BIRTH 25 27 19	
69. DATE OF BIRTH 25 27 19		70. DATE OF BIRTH 25 27 19		71. DATE OF BIRTH 25 27 19		72. DATE OF BIRTH 25 27 19	
73. DATE OF BIRTH 25 27 19		74. DATE OF BIRTH 25 27 19		75. DATE OF BIRTH 25 27 19		76. DATE OF BIRTH 25 27 19	
77. DATE OF BIRTH 25 27 19		78. DATE OF BIRTH 25 27 19		79. DATE OF BIRTH 25 27 19		80. DATE OF BIRTH 25 27 19	
81. DATE OF BIRTH 25 27 19		82. DATE OF BIRTH 25 27 19		83. DATE OF BIRTH 25 27 19		84. DATE OF BIRTH 25 27 19	
85. DATE OF BIRTH 25 27 19		86. DATE OF BIRTH 25 27 19		87. DATE OF BIRTH 25 27 19		88. DATE OF BIRTH 25 27 19	
89. DATE OF BIRTH 25 27 19		90. DATE OF BIRTH 25 27 19		91. DATE OF BIRTH 25 27 19		92. DATE OF BIRTH 25 27 19	
93. DATE OF BIRTH 25 27 19		94. DATE OF BIRTH 25 27 19		95. DATE OF BIRTH 25 27 19		96. DATE OF BIRTH 25 27 19	
97. DATE OF BIRTH 25 27 19		98. DATE OF BIRTH 25 27 19		99. DATE OF BIRTH 25 27 19		100. DATE OF BIRTH 25 27 19	
99. POSITION CONTROL CERTIFICATION [Signature]				100. APPROVED [Signature]			

SECRET
(When Filled In)

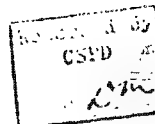
REQUEST FOR PERSONNEL ACTION				DATE PREPARED 18 April 1963	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HILLMAN, James N., Jr.			
3. NATURE OF PERSONNEL ACTION RESIGNATION			4. EFFECTIVE DATE REQUESTED MONTH 06 DAY 27 YEAR 63		5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		7. COST CENTER NO. CHARGEABLE 1232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff FI/CI Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0682		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (4)	
17. SALARY OR RATE \$ 8840					
18. REMARKS <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 20px auto;">Recorded by CSPD <i>[Signature]</i></div>					
19. SIGNATURE OF REQUESTING OFFICER Louis W. Armstrong, J.S.S.					
DATE SIGNED 18 Apr 63		19A. SIGNATURE OF CAREER SERVICE APPROVING [Signature]			
DATE SIGNED 18 Apr 63		DATE SIGNED 18 Apr 63			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
20. ACTION CODE 45	21. EMPLOY CODE 10	22. OFFICE CODE NUMERIC ALPHABETIC	23. STEP IN CODE	24. GRADE IN CODE	25. RATE OF PAY
26. DATE EXP. RES.	27. SPI. IN. REFERENCE	28. DET. SER. IN. DATE	29. SEPARATION DATE	30. SEPARATION DATE	31. DATE OF DEATH
32. VET. PREFERENCE	33. SER. COMP. DATE	34. SER. COMP. DATE	35. CAREER CATEGORY	36. REG. / HEALTH ASSURANCE	37. DATE OF DEATH
38. PREVIOUS GOVERNMENT SERVICE DATA		39. PREVIOUS GOV. DATA		40. STATE GOV. DATA	
41. POSITION CONTROL CERTIFICATION [Signature]		42. D.P. APPROVAL [Signature]		43. DATE APPROVED 14 Apr 63	

RZR1 25 APR 63

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
027630		HIDALGO B N JR							
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION				04 27 63		REGULAR			
6. FUNDS		7. V TO V		8. V TO CP		9. COST CENTER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY	
X						3232 1000 1000			
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION				
13. POSITION TITLE					14. POSITION NUMBER		15. SERVICE DESIGNATION		
OPS OFFICER					0682		D		
16. CLASSIFICATION SCHEDULE (GS, LO, etc.)			17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE		
GS			0136.01		11 4		8840		
20. REMARKS									
SIGNATURE OR OTHER AUTHENTICATION									

SECRET

REQUEST FOR PERSONNEL ACTION				DATE PREPARED																																																																																	
1. SERIAL NUMBER 027630				11 December 1963																																																																																	
2. NATURE OF PERSONNEL ACTION PROMOTION				3. EFFECTIVE DATE REQUESTED 12-1-63																																																																																	
4. FUNDS V. TO V CF TO V				5. CATEGORY OF EMPLOYMENT REGULAR																																																																																	
6. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				7. COST CENTER NO. CHARGEABLE 4132-2001-1000																																																																																	
8. POSITION TITLE OPS OFFICER				9. LOCATION OF OFFICIAL STATION JMWAVE																																																																																	
10. CLASSIFICATION SCHEDULE (GS, LD, etc.) GS				11. POSITION NUMBER 0731																																																																																	
12. OCCUPATIONAL SERIES 0136.01				13. GRADE AND STEP 12 (1)																																																																																	
14. REMARKS				15. SALARY OR RATE 9475																																																																																	
16. SIGNATURE REQUESTING OFFICIAL ORVILLE C. HANSON, S/SAS/Pers.				17. SIGNATURE OF CAREER SERVICE APPROVING OFFICER																																																																																	
18. DATE SIGNED 12/11/63				19. DATE SIGNED 12/11/63																																																																																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																																																																																					
<table border="1"> <tr> <td>20. ACTION CODE</td> <td>21. EMPLOY CODE</td> <td>22. CHARGE CODE</td> <td>23. SPECIAL CODE</td> <td>24. PAY GRADE</td> <td>25. PAY RATE</td> <td>26. PAY DATE</td> <td>27. PAY PERIOD</td> </tr> <tr> <td>22</td> <td>10</td> <td>4970</td> <td>0000</td> <td>12</td> <td>12</td> <td>12/12/63</td> <td>12/12/63</td> </tr> <tr> <td colspan="2">28. NTE EXP RES</td> <td colspan="2">29. SPECIAL REFERENCE</td> <td colspan="2">30. RESIDUAL DATA</td> <td colspan="2">31. ESTIMATE</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">32. NTE EXP RES</td> <td colspan="2">33. SPECIAL REFERENCE</td> <td colspan="2">34. RESIDUAL DATA</td> <td colspan="2">35. ESTIMATE</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">36. NTE EXP RES</td> <td colspan="2">37. SPECIAL REFERENCE</td> <td colspan="2">38. RESIDUAL DATA</td> <td colspan="2">39. ESTIMATE</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">40. NTE EXP RES</td> <td colspan="2">41. SPECIAL REFERENCE</td> <td colspan="2">42. RESIDUAL DATA</td> <td colspan="2">43. ESTIMATE</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> </table>						20. ACTION CODE	21. EMPLOY CODE	22. CHARGE CODE	23. SPECIAL CODE	24. PAY GRADE	25. PAY RATE	26. PAY DATE	27. PAY PERIOD	22	10	4970	0000	12	12	12/12/63	12/12/63	28. NTE EXP RES		29. SPECIAL REFERENCE		30. RESIDUAL DATA		31. ESTIMATE										32. NTE EXP RES		33. SPECIAL REFERENCE		34. RESIDUAL DATA		35. ESTIMATE										36. NTE EXP RES		37. SPECIAL REFERENCE		38. RESIDUAL DATA		39. ESTIMATE										40. NTE EXP RES		41. SPECIAL REFERENCE		42. RESIDUAL DATA		43. ESTIMATE									
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44. POSITION CONTROL CERTIFICATION																																																																																					
45. D.P. APPROVAL																																																																																					
46. DATE APPROVED																																																																																					



FORM 1152 (REPLACES FORMS 1152-1 AND 1152-2)

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 6 November 1962	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) JONAS, Allen, Jr.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 1 62		5. CATEGORY OF EMPLOYMENT REASSIGN	
6. FUNDS Y TO Y CF TO Y		7. COST CENTER NO. CHARGEABLE 33051-00-300		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP Task Force W F-01 Branch				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 002		13. CAREER SERVICE DESIGNATION J			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0000		16. GRADE AND STEP 11 04		17. SALARY OR RATE \$720	
18. REMARKS From: DDP/JE/Platoon St., The 1st, B.C., 676/62 Tray 1 CO, CP BRANCH: Sgt. B. [Signature] Philip G. [Signature], JE/Pers. Off. 6/11/62							
19. SIGNATURE OF REQUESTING OFFICIAL [Signature]				DATE SIGNED 6/11/62		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 37	22. EMPLOY CODE 10	23. OFFICE CODING NUMERIC ALPHABETIC 61300 TFW	24. STATION CODE	25. INTER-JOB CODE	26. MONTH CODE 1	27. DATE OF BIRTH 5 12 71 19	28. DATE OF DEATH
29. RATE EXPIRES NO. DA. YR.		30. RETIREMENT DATA 1 - CSC 3 - FICA 5 - NONE		31. SEPARATION DATA CODE TYPE		32. CORRECTION/CANCELLATION DATA NO. DA. YR.	
33. VET. PREFERENCE 1 - NONE 2 - 5 PT 3 - 10 PT		34. SERVS. COMP. DATE NO. DA. YR.		35. LONG. COMP. DATE NO. DA. YR.		36. CAREER CATEGORY CAREER PROV. TEMP.	
37. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 - NO PREVIOUS SERVICE 2 - NO BREAK IN SERVICE 3 - BREAK IN SERVICE (LESS THAN 3 YRS) 4 - BREAK IN SERVICE (MORE THAN 3 YRS)		38. LEAVE CAT. CODE		39. FEDERAL TAX DATA FORM PREPARED CODE 1 - YES 2 - NO		40. STATE TAX DATA STATE TAX DATA	
41. POSITION CONTROL CERTIFICATION 3. Kearney 11/19/62				42. O.P. APPROVAL [Signature]		43. DATE APPROVED	

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, JAMES H. JR.				4. JANUARY 1962	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED 1 1 1962		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; background-color: black; margin-right: 5px;"></div> <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; padding: 2px;">X</div> <div style="border: 1px solid black; padding: 2px;">V TO V</div> <div style="border: 1px solid black; padding: 2px;">V TO CF</div> <div style="border: 1px solid black; padding: 2px;">CF TO V</div> <div style="border: 1px solid black; padding: 2px;">CF TO CF</div> </div> </div>		7. COST CENTER NO. CHARGEABLE 2235 1000 1000		8. OFFICIAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATION DDP WH SECTION A PLANS & OPERATIONS STAFF				10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER SA-641		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 3		17. SALARY OR RATE \$8,080	
18. REMARKS 38 FROM: DDP/WH/1-FI-CI/#681							
18A. SIGNATURE OF REQUESTING OFFICIAL <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Personnel				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>R. Healy</i>	
		DATE SIGNED					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 20	20. EMPLOY CODE C	21. OFFICE CODING <div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; padding: 2px;">NUMERIC</div> <div style="border: 1px solid black; padding: 2px;">ALPHABETIC</div> </div>	22. STATION CODE 1	23. INT. DATE CODE 05127119	24. DATE OF BIRTH MO DA YR	25. DATE OF DEATH MO DA YR	26. DATE OF LIA MO DA YR
27. RATE EXPIRES MO DA YR	28. SPECIAL REFERENCE 1 = 100 2 = 100 3 = 100	29. RET. REMIT DATA CODE	30. SEPARATE EMPLOYMENT INFORMATION DATE CODE	EOD DATA		31. SECURITY REQ. NO.	32. SER
33. VET. PREFERENCE CODE	34. SERV. COMP. DATE MO DA YR	35. LONG. COM. DATE MO DA YR	36. MIL. SERV. DATA 1 = YES 2 = NO	37. REG. / MIL. IN. DATA 1 = YES 2 = NO	38. SOCIAL SECURITY NO.		
39. PREVIOUS GOVERNMENT SERVICE DATA CODE		40. STATE OF ORT. CODE	41. FEDERAL TAX DATA 1 = YES 2 = NO		42. STATE TAX DATA 1 = YES 2 = NO		
43. POSITION CONTROL CERTIFICATION <i>1/16/62 JH</i>		44. J.P. APPROVAL <i>R. Healy</i>				DATE APPROVED	

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 027630						2. NAME (Last-First-Middle) HIDALGO, B. N., Jr.	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 20 61		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUND X		7. COST CENTER NO. CHARGEABLE 2635-5000-8021		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DDP Branch 4 FI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER (D)				12. POSITION NUMBER 0681		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS (12)		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (3)		17. SALARY OR RATE \$ 8,080	
18. REMARKS From: DDP/WH, Br. 4, #0626							
18a. [Signature]				18b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]			
19. BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 16		22. EMPLOY CODE 16		23. DATE OF ACTION 05 27 19		24. DATE OF LEI []	
25. DATE OF REP []		26. DATE OF REP []		27. DATE OF REP []		28. DATE OF REP []	
29. DATE OF REP []		30. DATE OF REP []		31. DATE OF REP []		32. DATE OF REP []	
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37. DATE OF REP []		38. DATE OF REP []		39. DATE OF REP []		40. DATE OF REP []	
41. DATE OF REP []		42. DATE OF REP []		43. DATE OF REP []		44. DATE OF REP []	
45. DATE OF REP []		46. DATE OF REP []		47. DATE OF REP []		48. DATE OF REP []	
49. DATE OF REP []		50. DATE OF REP []		51. DATE OF REP []		52. DATE OF REP []	
53. DATE OF REP []		54. DATE OF REP []		55. DATE OF REP []		56. DATE OF REP []	
57. DATE OF REP []		58. DATE OF REP []		59. DATE OF REP []		60. DATE OF REP []	
61. DATE OF REP []		62. DATE OF REP []		63. DATE OF REP []		64. DATE OF REP []	
65. DATE OF REP []		66. DATE OF REP []		67. DATE OF REP []		68. DATE OF REP []	
69. DATE OF REP []		70. DATE OF REP []		71. DATE OF REP []		72. DATE OF REP []	
73. DATE OF REP []		74. DATE OF REP []		75. DATE OF REP []		76. DATE OF REP []	
77. DATE OF REP []		78. DATE OF REP []		79. DATE OF REP []		80. DATE OF REP []	
81. DATE OF REP []		82. DATE OF REP []		83. DATE OF REP []		84. DATE OF REP []	
85. DATE OF REP []		86. DATE OF REP []		87. DATE OF REP []		88. DATE OF REP []	
89. DATE OF REP []		90. DATE OF REP []		91. DATE OF REP []		92. DATE OF REP []	
93. DATE OF REP []		94. DATE OF REP []		95. DATE OF REP []		96. DATE OF REP []	
97. DATE OF REP []		98. DATE OF REP []		99. DATE OF REP []		100. DATE OF REP []	
99. POSITION CONTROL CERTIFICATION [Signature] 08/1/61				99. O.P. APPROVAL [Signature]			

SECRET **REQUEST FOR PERSONNEL ACTION**

1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Prob.		5. Sex		6. CS-FOU		
		HIDALGO, BALKES H., JR.				05 27 19			5 P-1		M				
7. SCD		8. CSC Rept.		9. CSC Or Other Legal Authority				10. Appt. Affidav.		11. FEGLI		12. LCD		13. Other	
Mo. Da. Yr.		Yes-1 Code No-2						Mo. Da. Yr.		Yes-1 Code No-2		Mo. Da. Yr.		Yes-1 Code No-2	

2 **PREVIOUS ASSIGNMENT**

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DIS/OTR OPERATIONS SCHOOL COVERT TRAINING						WASH., D. C.					
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - USStd - Fragn -		INSTRUCTOR OPERATIONS		1014		GS		1711.50			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11 2		\$ 7270		D		03/17/58		03/17/61		0175-2533	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code: 30. Separation Data	
REASSIGNMENT		17		06/26/60		REGULAR		17	

3A **PRESENT ASSIGNMENT**

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP WH BRANCH 4				3167		WASH., D. C.					
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - USStd - Fragn -		OPS OFFICER		BA-626		GS		0136.01			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11 2		\$ 7270		D						0135 1000 1000	

SOURCE OF REQUEST

A. Requester (Name & Title)		C. Request Approved By (Signature And Title)	
WH/PERSONNEL OFFICER		17 June 60	
B. For Additional Information Call (Name & Telephone Ex.)		PERSONNEL OFFICER	
18242			

CLEARANCES

Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board		W. K. R. 6-21-60		6-21-60		D. Placement					
B. Pos. Control		W. K. R. 6-23-60		6-23-60		E.					
C. Classification						F. Approved By		W. K. R. 6-23-60		6-23-60	

Remarks	
2 copies to Security. 1 Loss Notice.	

SECRET
(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION										V. to V		XX		V. to UV			
Mo	Da	Yr											UV to V		UV to UV					
5	20	59																		
1. Serial No.			2. Name (Last-First-Middle)										3. Date of Birth		4. Var. Pref.		5. Sex		6. CS - EOD	
			HIDALGO, Balma N., Jr.										Mo Da Yr		None-0 SP-1 10 P-2		M		Mo Da Yr	
													5 27 19							
7. SCD			8. CSC Reim.			9. CSC Or Other Legal Authority			10. Appt. Affidav.			11. FEGLI			12. LCD			13. MIL SERV. CREDIT LCB		
Mo Da Yr			Yes-1 Code No-2						Mo Da Yr			Yes-1 Code No-2			Mo Da Yr			Yes-1 Code No-2		

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/WH Branch III Central America Section						Washington, D. C.					
16. Dept.-Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - Usld. Frn. - D		Area Ops Officer		0486		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11 1		\$ 7,030		D		Mo Da Yr 03 17 58		Mo Da Yr 09 10 59		8-3500-20	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment + Transfer to Confidential Funds		07		Mo Da Yr 06 14 59		Regular		C1			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDS/OTR Operations School Covert Training				1172		Washington, D. C.				750023	
33. Dept.-Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - Usld. Frn. - 3		Instructor Operations		1014		GS		1711.50			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11 1		\$ 7,030		D		Mo Da Yr		Mo Da Yr		9-7500-30-018	

SOURCE OF REQUEST

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
C/OS		Frank K. G. [Signature] Director of Training	
B. For Additional Information Call (Name & Telephone Ext.)			
x-3078			

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	[Signature]	11 JUN 59	D. Placement		
B. Pos. Control	CP	11 JUN 59	E.		
C. Classification			F. Approved By	C. Powell	11 JUN 59

Remarks

One copy forwarded to UNVOUCHERED Payroll. Two copies forwarded to Security.

Recorded by
CSPD

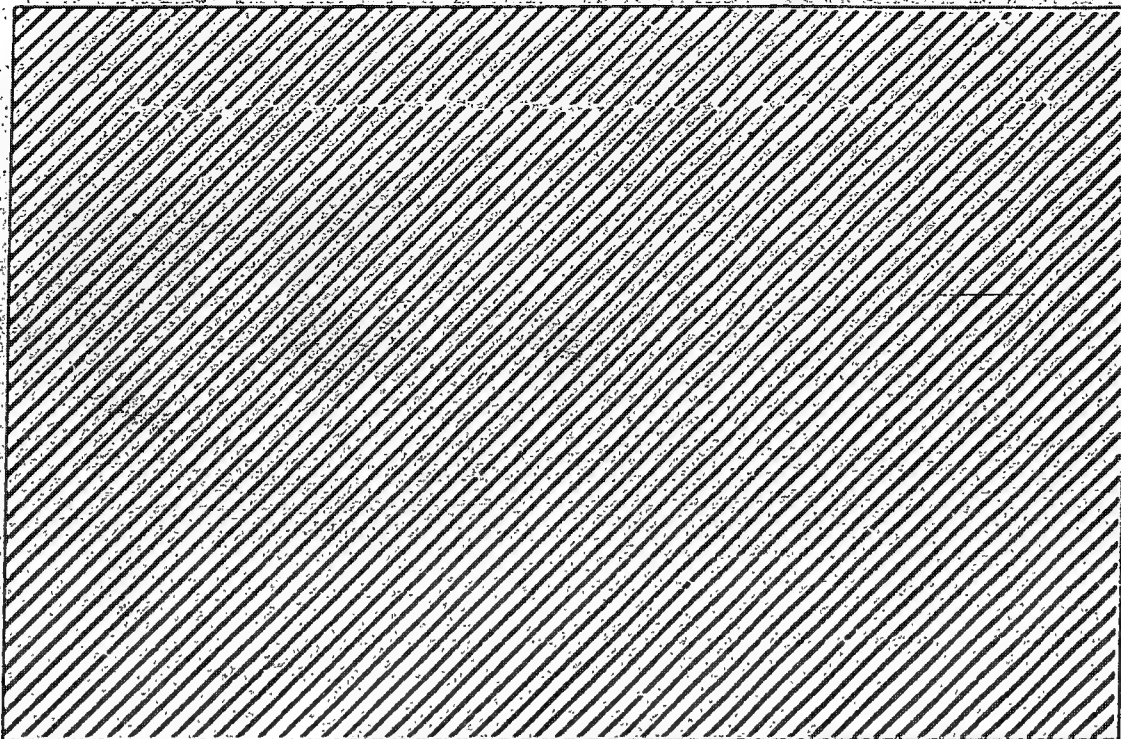
FORM 12-57 1152a (USE PREVIOUS EDITION)

SECRET

Security Approved For [Signature] Date: 06/17/59

SECRET

(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
HIDALGO, Ealmea	unk	58-112

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on 1 Oct 57.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF BCD REPRESENTATIVE
21 Sept 58	<i>[Signature]</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

Classify According
To Standard

E 2266												REQUEST FOR PERSONNEL ACTION												2 7/24/58											
1. Serial No.				2. Name (Last-First-Middle)								3. Date Of Birth				4. Var. Pref.				5. Sex				6. CS - EOD											
12762				MR. BALMES N. HIDALGO, JR.								Mo 5 Da 27 Yr 19				None-0 Code 1				M L				Mo 2 Da 17 Yr 58											
7. SCD				8. CSC Reim				9. GSC Or Other Legal Authority				10. Appt. Affidav				11. FECL				12. LCD				13. Code LCP											
Mo 7 Da 16 Yr 46				Yes-1 Code No-2 1				5045A 4631				Mo 3 Da 13 Yr 58				Yes-1 Code No-2 1				Mo 2 Da 17 Yr 58				Yes-1 Code No-2 2											

14. Organizational Designations												Code				15. Location Of Official Station												Station Code			
16. Dept. Field												17. Position Title				18. Position No.				19. Serv.				20. Occup. Series							
21. Grade & Step												22. Salary Or Rate				23. SD				24. Date Of Grade				25. PSI Due				26. Appropriation Number			
												\$								Mo Da Yr				Mo Da Yr							

ACTION

27. Nature Of Action				Code				28. Eff. Date				29. Type Of Employee				Code				30. Separation Data			
Excepted Appointment				13				Mo 3 Da 17 Yr 58				Regular				C1							

PRESENT ASSIGNMENT

31. Organizational Designations												Code				32. Location Of Official Station												Station Code			
DDP/WH Branch III Central America Section												4613				Washington, D.C.															
33. Dept. Field				34. Position Title				35. Position No.				36. Serv.				37. Occup. Series															
Dept. X Code				Area Ops Officer				# BA-486-11				GS				0136.01															
38. Grade & Step				39. Salary Or Rate				40. SD				41. Date Of Grade				42. PSI Due				43. Appropriation Number											
11-A				\$ 6390				D				Mo 3 Da 17 Yr 58				Mo 9 Da 12 Yr 58				8-3500-20											

SOURCE OF REQUEST

A. Requested By (Name And Title)												C. Request Approved By (Signature And Title)											
[Signature] /WH/ Personnel Officer												[Signature]											
B. For Additional Information Call (Name & Telephone Ext)																							
[Signature] X 8242																							

CLEARANCES

Clearance		Signature		Date		Clearance		Signature		Date	
A. Career Board		[Signature]		3/12/58		D. Placement		[Signature]		3/14/58	
B. Post. Control		[Signature]		5/11/58		E.		[Signature]			
C. Classification		[Signature]				F. Approved By		[Signature]		10/15/1958	

Remarks											
Subject is presently engaged as a Contract Employee with the WH Division. * For slotting purposes Only.											

STANDARD FORM 52
FORM 10-57320-6
U.S. GOVERNMENT PRINTING OFFICE
1954 O - 375,000
GPO: 1954 O - 375,000
GPO: 1954 O - 375,000

SECRET

UNVOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss, etc. Give name, initials, and surname) Mr. Balmes N. HIDALGO, Jr.	2. DATE OF BIRTH 27 May 1919	3. REQUEST NO.	4. DATE OF REQUEST 8 July 55
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.): Excepted Appointment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.):		B. APPROVED:	

FROM—	9. POSITION TITLE AND NUMBER	TO— I. O. (FI) BAF-277
	10. SERVICE, GRADE, AND SALARY	GS-0136.51-11, \$6390.00 p.a.
	11. ORGANIZATIONAL DESIGNATIONS	DDP/WH
	12. HEADQUARTERS	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

A. REMARKS (Use reverse if necessary)

Subject is presently a contract employee with Project HYPOTHESIS.

B. REQUESTED BY (Name and title) <i>[Signature]</i> C/WH	D. REQUEST APPROVED BY Signature: _____ Title: _____
E. FOR ADDITIONAL INFORMATION (Name and telephone extension) 33692	

13. VETERAN PREFERENCE	14. POSITION CLASSIFICATION ACTION
NONE WWH OTHER 5 PT 13 POINT DISAB. OTHER	NEW VICE I.A. REAL

15. SEX M	16. RACE W	17. APPROPRIATION FROM: 6-3525-56-051 TO:	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
---------------------	----------------------	--	---	--	---

21. STANDARD FORM 50 REMARKS

[Handwritten notes and signatures]

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>[Signature]</i>	3 Aug 55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	420	7-20	
E.			
F. APPROVED BY <i>[Signature]</i> 7/28			

SECRET

(When Filled In)

1. PERSONAL SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART I) EODI 16 Jul 1976			
2. NAME (Last-First-Middle) HYNAN, G. B. N., Jr.		3. SEX M	4. DATE OF BIRTH 27 May 1918	5. LONGEVITY COMP. DATE 18 Feb 1952	
6. MARITAL STATUS Married	7. DEPENDENTS (Excl. Spouse) 2	8. YEARS OF BIRTH 1914-1892	9. US NATURALIZATION DATE(S) NA Puerto Rico NA		
10. CAREER STATUS D	11. MEMBERSHIP Mar 1961	12. OTHER STATUS	13. LAST MED. APT. DATE Jul 1967	14. QUAL. FOR Dept Only	15. EVAL. FOR TDY O/S
16. CURRENT RESERVE STATUS D	17. NON-SERVICE	18. GRADE	19. ACTIVE DUTY WITH CIA CAT. 1	20. RELEASE TO MIL. SER. CAT. 1	21. DEFERRED CAT. 2
12. ASSIGNMENT DATE None		13. PROFESSIONAL TEST DATE Feb 1958		14. LANGUAGE APTITUDE TEST DATE None	
15. EMPLOYMENT HISTORY SINCE 13 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)					
1943-49 Military Service, US Army, Col - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Loggitt Co (Food Wholesaler), NYC - Correspondence Clerk 1948-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951-52 Dept of Defense, New York ON Procurement Agency, NYC - Inspector					
16. NON-CIA EDUCATION High School Graduate					
1945-46 New York University - Foreign Trade, Business Law					
17. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R-Interm; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Interm; P, S, U Native (Nov 1959); Translator, Interpreter - May 1958			
18. AGENCY SPONSORED TRAINING					
1958 Comm Party Org & Ops		1958 Intel Orient			
1958 CI Famil		1959 Picks & Locks			
1958 Info Rptng, Rptg & Rptg		1959 Audio Surveil Mgmt			
1958 Operations		1966 Undetermined Entry (Act)			
19. CIA EMPLOYMENT HISTORY SINCE 13 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	ED	ORGANIZATION & EMPH. TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project HYPOTHESIS Area Ops Off 0136.01	11	D	DDP/WH-III/Control America	Hq
	Jan - Feb 1959, TDY				
Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covert Trng	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WH-4	"
Aug 1961	" " 0136.01	11	D	DDP/WH-4/FI-CI Sec	"
Jan 1962	" " 0136.01	11	D	DDP/WH/Plans & Ops Sec/Sec A	"
Apr 1963	" " 0136.01	11	D	DDP/SAS/US Fld/Forward, Ops Sta	JMWAVE
Dec 1963	" " 0136.01	12	D	" " " " " " " "	"
Apr 1964	" " 0136.01	12	D	DDP/SAS/CS/CS Dev Corp	Hq
Nov 1964	" " 0136.01	12	D	DDP/SAS/CI Staff/Ops	"
May 1965	" " 0136.01	12	D	DDP/WH/CI/CI Staff/Ops	"
Dec 1965	" " 0136.01	12	D	DDP/WH-2/	"
20. DATE REVIEWED 23 Jun 1966		21. PROFILE REVIEWED BY HYNAN		22. STAFF 1-10 REVIEWED & VERIFIED BY EMPLOYEE HYNAN 1966	


FORM 1200 (PART I) USE PREVIOUS EDITIONS

SECRET

* PROFILE

(4)

SECRET
(When Filled In)

PERS. SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HENDRICKS, R. N., JR.		DATE OF BIRTH 27 May 1919	
23. SUMMARY OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
 A black and white portrait of a man with glasses, wearing a suit and tie. Below the portrait is a nameplate that reads "Hendricks, R. N., Jr.".			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Appreciation 1968 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.			
27. DATE REVIEWED 23 Jun 1969		28. PROFILE REVIEWED BY HNS/ots	

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						027630	
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Hidalgo Balmes N.			05/27/19	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF/CIV. BR. OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/MH/2		HQS		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR				
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			XX ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)				
31 January 1969			1 January 1968 - 31 December 1968				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial actions. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Primary Desk Case Officer for [redacted] FI operations. Prepares cables and dispatches to [redacted] and other Stations and internal Headquarters correspondence.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Conducts required coordination with other offices within the agency.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Supervises and/or maintains files and regulates indexing relating to his cases.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						P	

SECRET
(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Bases of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the [] Desk this officer provides the valuable service of operational history and continuity; he served six years [] and has been on the desk for three.

Continued

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 9 Jan 1969	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS GIVEN UNDER MY SUPERVISION 4	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION <i>[Initials]</i>	
DATE 9 January 1969	OFFICIAL TITLE OF SUPERVISOR C/WI/2/P	SIGNATURE <i>[Signature]</i>
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.		
DATE 9 JAN 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WI/2	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Edwin M. Terrell

SECRET

SECRET

SECTION C Continued

Hidalgo, Balme N.

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the [] Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) HIDALGO, Balmes N., Jr.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/2		
7. CHECK (X) TYPE OF APPOINTMENT			8. CURRENT STATION Headquarters		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):		
10. REASSIGNMENT SUPERVISOR			10. REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To) 13 JAN 1967 by SP 12-66		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Responsible for all FI/CI Projects for the Desk					RATING LETTER S
SPECIFIC DUTY NO. 2 Initiates, prepares and coordinates all operational communications to the field on FI/CI matters					RATING LETTER P
SPECIFIC DUTY NO. 3 Prepares project renewals, studies and papers on FI/CI matters					RATING LETTER P
SPECIFIC DUTY NO. 4 Translates Spanish language material for the Branch					RATING LETTER O
SPECIFIC DUTY NO. 5 Coordinates FI/CI matters for the Desk with other Hqs components					RATING LETTER S
SPECIFIC DUTY NO. 6 Occasionally handles visiting indigenous assets					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
31 MAR 1967 Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

SECTION C		NARRATIVE COMMENTS	
<small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</small>			
<p>Comment by Mr. Tsikerdanos, previous supervisor: 151 F11 '67</p> <p>Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.</p> <p>Comments by Present Supervisor:</p> <p>I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.</p> <p align="right">Ken Knaus</p>			
SECTION D			
CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE 10 March 67	SIGNATURE OF EMPLOYEE <i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 11	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE 9 MAR 1967 C 1967	OFFICIAL TITLE OF SUPERVISOR Formerly C/NH/2/P Present C/NH/2/P	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Eugene J. Tsikerdanos <i>[Signature]</i> Ken Knaus	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL <p>Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.</p> <p>Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.</p>			
DATE 9 MAR 1967	OFFICIAL TITLE OF REVIEWING OFFICIAL C/NH/2	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Edwin M. Terrell	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) HUTALCO, Carlos A., Jr.			2. DATE OF BIRTH 27 Jan 1919	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE C's Officer			7. OFF/DIV/BR OF ASSIGNMENT DD/P/C		6. CURRENT STATION Headquarters
9. CHECK IN TYPE OF APPOINTMENT			10. CHECK IN TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 15 Jan - 30 October 1955		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.					P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and					S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.					S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.					S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

4 JAN 1956

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B by providing basis for determining future personnel action. Managerial performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p> <p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with no exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>	


SECRET

SECRET
(When Filled In)

1. PERM. SERIAL NO. 27630		BIOGRAPHIC PROFILE (PART I) SCD: 16 Jul 1946			
2. NAME (Last-First-Middle) WILLIAM S. RIALES, Jr.		3. SEX M	4. DATE OF BIRTH May 1919	5. LONGEVITY COMP. DATE 17 Mar 1958	
6. MARITAL STATUS Married	7. DEPENDENT(S) (Specify Name) 3	8. YEARS OF BIRTH 1927 1945 1950		9. NATURALIZATION DATE(S) NA Puerto Rico NA	
10. CARRIED STAFF STATUS D	11. MEMBERSHIP D	12. OTHER STATUS Pending		13. LAST REG. OPT. EVAL. FOR Sep 1962 Deft Only TDY O/S	
14. CURRENT RESERVE STATUS D	15. NONE SERVICE D	16. GRADE D	17. ACTIVE DUTY WITH CIA CAT. 1	18. RELEASED TO MIL. SER. CAT. 1	19. TO BE DEFERRED CAT. 3
20. ASSESSMENT DATE None		21. PROFESSIONAL TEST DATE Feb 1958		22. LANGUAGE ABILITY TEST DATE None	
23. CIA EMPLOYMENT HISTORY 1940-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Lussitt Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
24. NON-CIA EDUCATION 1945-46 New York University - Foreign Trade, Business Law					
25. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested) Portuguese - R Interim; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Interim; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
26. AGENCY SPONSORED TRAINING 1958 Intel Orient 1958 Comm Party Org & Ops 1958 CI Famit 1958 Info Rptg, Rpts & Rqmts 1958 Operations 1959 Picks & Locks 1959 Audio Surveil Mgmt					
27. CIA EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & DEPT. TITLE (If Any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project HYPOTHESIS Area Ops Off. 0136.01	11	D	DDP/WH-III/Cantral America	Hq
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala				
Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covert Trng	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WH-4	"
Aug 1961	" " 0136.01	11	D	DDP/WH-4/FI-CI Sec	"
Jan 1962	" " 0136.01	11	D	DDP/WH/Plans & Ops Stf/Sec A	"
Apr 1963	" " 0136.01	11	D	DDP/SAS/US Fld/forward Ops Sta	JMWAVE

28. DATE REVIEWED 24 Oct 1963	29. PROFILE REVIEWED BY OP/POD/QC/hms/rwh	30. ITEMS 1-10 REVIEWED & VERIFIED BY EMPLOYEE 9 Feb 1960
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SECRET
(When Filled In)

PERS. SERIAL NO. 27630		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Baltes Nieves, Jr.		DATE OF BIRTH May 1919	
 HIDALGO B N JR			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION			
27. DATE REVIEWED		28. PROFILE REVIEWED BY OP/POB/SAB	

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD
HIDALGO, BALMES			27 May 1919		M	GS-11	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/DR OF ASSIGNMENT 8. CURRENT STATION				
Ops Officer			DDF WH P&O SEC A.				
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/>			INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify) <input type="checkbox"/>				
CAREER-PROVISIONAL (See Instructions - Section C)			REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/>				
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From to)				
30 October 1962			17 Jan 62 - 30 Sep 62				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Responsible for initiation and development of WH Division durable assets program.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Collate and maintain files on espionage laws of LA countries.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Served as interpreter and translator for Division LA contacts.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinated with Branch 1 of WHD on FI and CI matters.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Gives lectures as guest instructor to students attending School of International Communism.						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						P	

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p><small>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Merits of performance of managerial or supervisory duties must be described, if applicable.</u></small></p>			
<p>Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.</p>			
<p>It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
18 Sept 62	<i>Salvador Hidalgo</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
18 September 1962			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
18 September 1962	C/WH/PO/A		
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I have had insufficient personal contact with Subject to make any meaningful comments.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	RE
13 September 1962	C/WH/CPS		

SECRET

SECRET
(When Filled In)

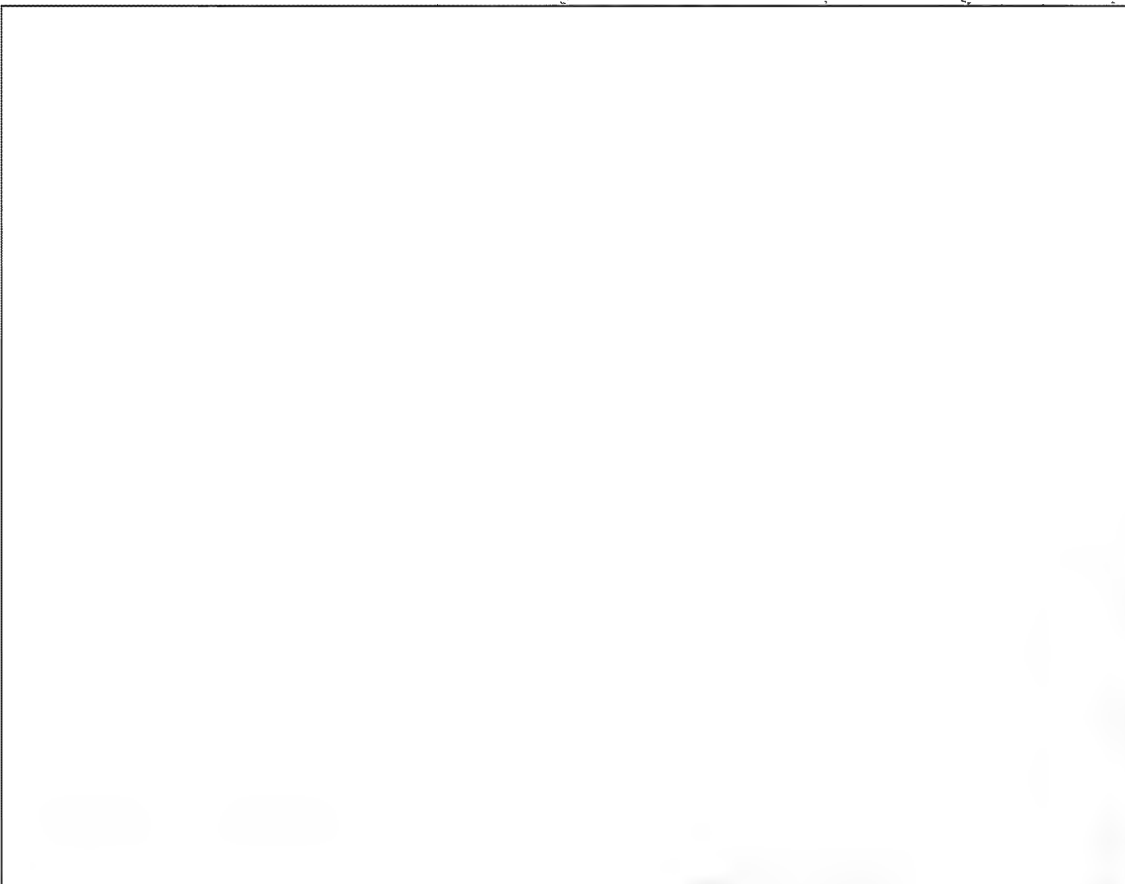
FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630					
SECTION A GENERAL									
1. NAME (Last) HIDALGO		(First) Balboa		(Middle) N., Jr.	2. DATE OF BIRTH 27 May 1919				
3. SERVICE DESIGNATION D		4. OFFICIAL POSITION TITLE Operations Officer		5. SEX Male 6. GRADE GS-11					
7. OFF. DIV./BR OF ASSIGNMENT DDP/WH, Rm. 4, D.C.									
8. CAREER/STAFF STATUS			9. TYPE OF REPORT						
<input type="checkbox"/> NOT ELIGIBLE <input type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT/EMPLOYEE						
10. DATE REPORT DUE IN O.P. 31 October 1961		11. REPORTING PERIOD Oct60 To 30 Sep61		12. SPECIAL (Specify)					
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES									
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).									
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding									
SPECIFIC DUTY NO. 1 Hqs. C.O. for 3 major CI/PI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		RATING NO. 5		SPECIFIC DUTY NO. 4 Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.					
SPECIFIC DUTY NO. 2 Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		RATING NO. 4		SPECIFIC DUTY NO. 5					
SPECIFIC DUTY NO. 3 Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		RATING NO. 6		SPECIFIC DUTY NO. 6					
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION									
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance:									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. <div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">5</div>				
SECTION D DESCRIPTION OF THE EMPLOYEE									
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee:									
1 - Least possible degree 2 - Limited degree 3 - Normal degree 4 - Above average degree 5 - Outstanding degree									
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING				
					1	2	3	4	5
GETS THINGS DONE								X	
RESOURCEFUL								X	
ACCEPTS RESPONSIBILITIES								X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								X	
DOES HIS JOB WITHOUT STRONG SUPPORT								X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								X	
WRITES EFFECTIVELY							X		
SECURITY CONSCIOUS							X		
THINKS CLEARLY								X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								X	
OTHER (Specify):									
SEE SECTION "E" ON REVERSE SIDE									

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE <small>Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.</small>		
<p>Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.</p> <p>He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.</p>		
SECTION F CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
11	Subject hospitalized.	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
20 March 62	D/Chief, WH/L/CI	
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
21 March 1962	C/WH/L/CI	

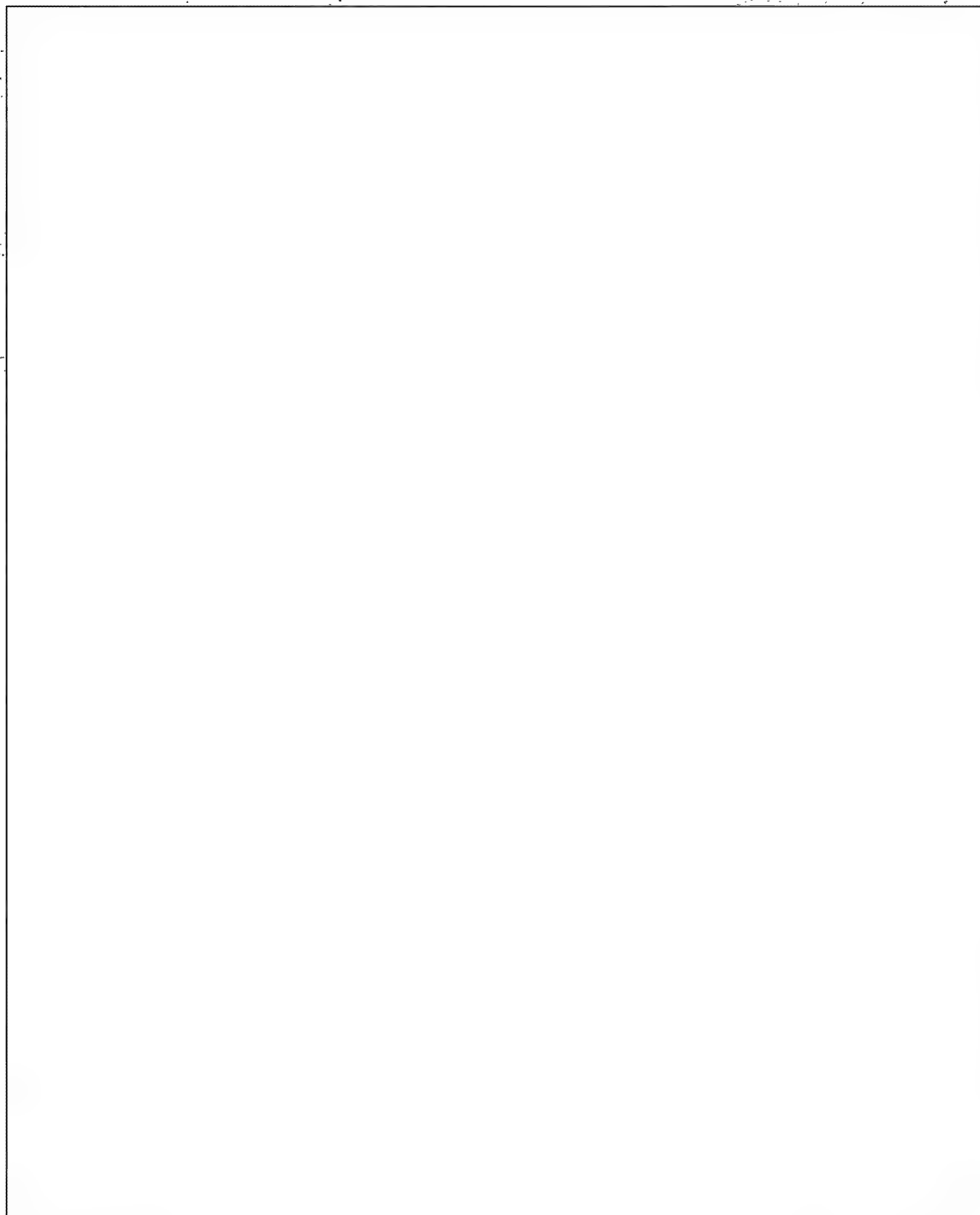
SECRET

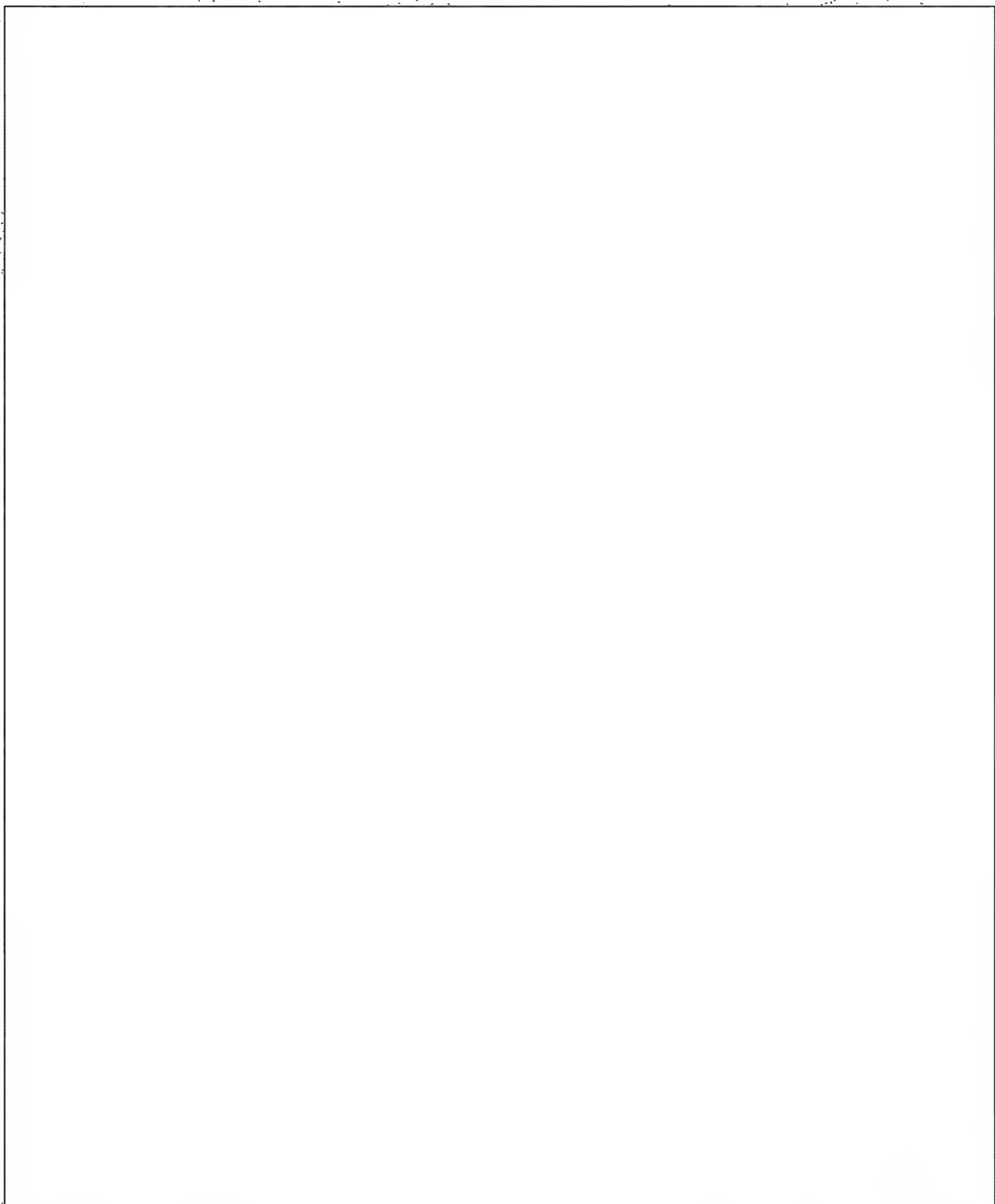


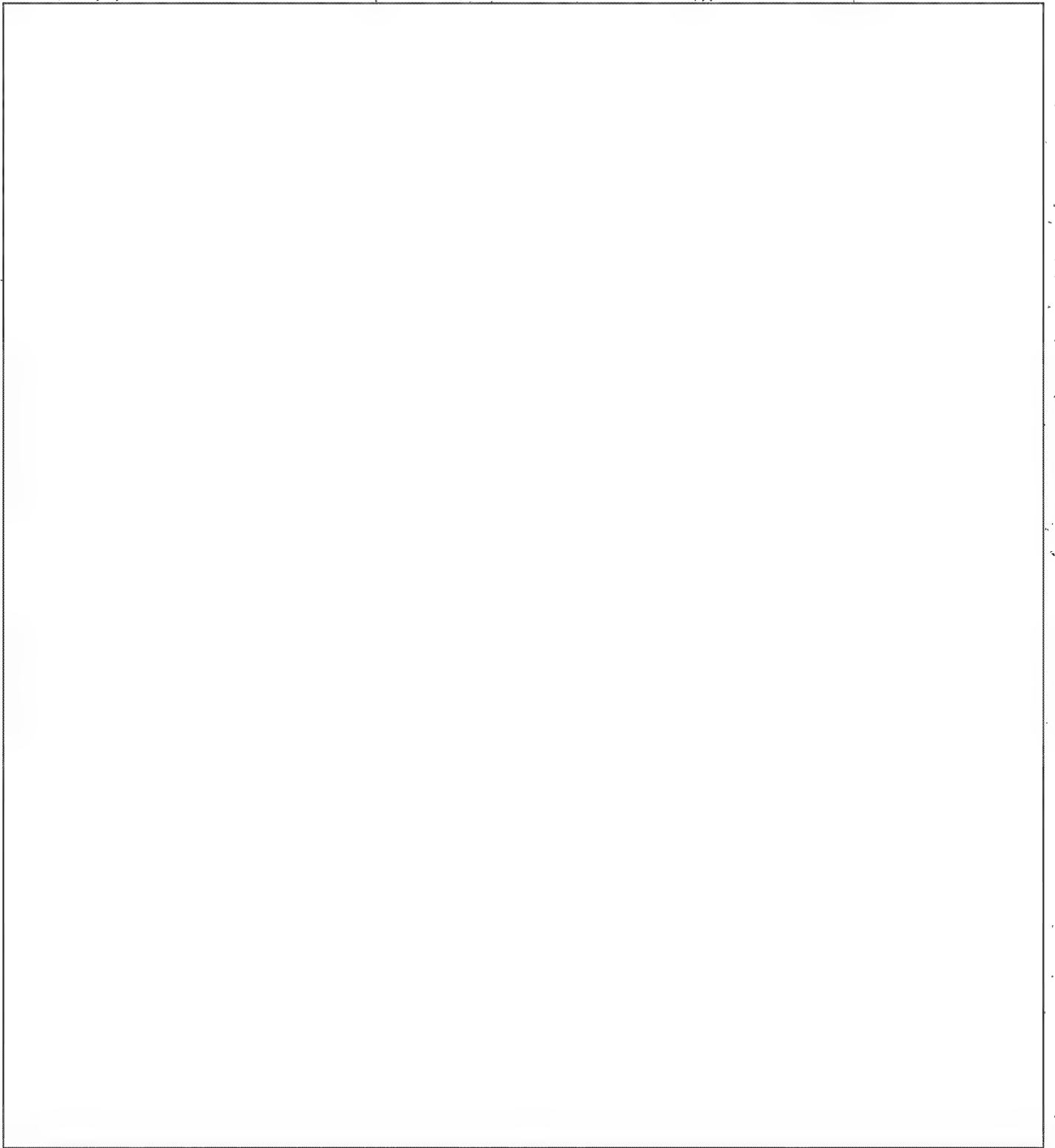
Latin

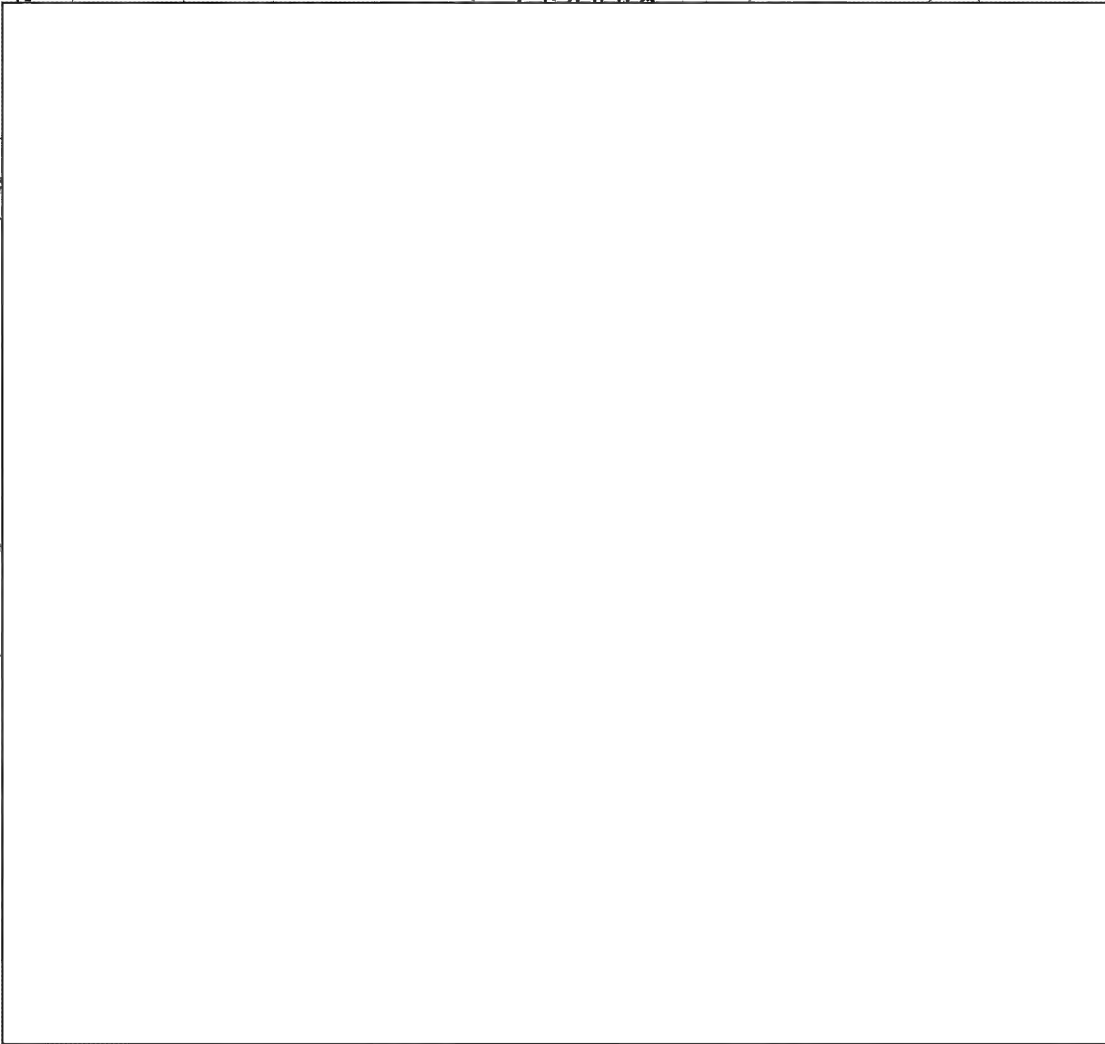
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THIS SECRET MUST REMAIN

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03

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-211 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCT. 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME: HIRALCO, B. N., JR. SERIAL: 007630 ORG: 51 350 GRADE: V 12 5 NEW SALARY: \$16,004

1. LAST NAME: HIRALCO, B. N. JR.		INITIAL(S):		2. APPOINTMENT DATA Entered on duty: F, T, P, T		3. TOTAL SERVICE FOR LEAVE (as of: of separation)		
4. DATE AND NATURE OF SEPARATION: RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70				Subject to Sec 203(d) 1937 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec 203(d) on Annual Leave Bal		Years: Months: Days: <input type="checkbox"/> More than 15 years		
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)				SUMMARY OF HOME LEAVE (DAYS)				REMARKS SCD 7/16/46
5. Balance from prior leave year ended 1/10 1970 46 8				14. Date arrival abroad for HL purposes				
6. Current leave year accrual through 2/21 1970 24 12				15. Current balance as of 19				
7. Total 70 20				16. 12 month accrual rate				
8. Reduction in credits, if any (current year)				17. Dates leave used, prior 24 months				
9. Total leave taken 4 20				18. Monthly accrual date				
10. Balance 66 0				19. Calendar days credit for next accrual date				
11. Total hours paid in lump sum 66 hrs				20. Date basic service period completed				
12. Salary rate(s) \$15,173.00				21. Dates during current calendar yr to				
13. Lump sum leave dates from 0830 3/02/70 to 3/11/70 1030 (Hours)				22. Dates during preceding calendar yr to				
20. Certified correct by (Signature): for Chief Payroll (Title)				23. During leave year in which separated				MILITARY LEAVE 24. During step increase making period which began on 12/15/68 25. During 12-month HL accrual period (sales)
Date: 3/13/70 (Date)				26. During 12-month HL accrual period (sales)				
Telephone: 143-2585 (Telephone)				27. During 12-month HL accrual period (sales)				

5-71-70

70-1271

70-1556

3-1 MAR 1970

Mr. Balmes N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

/s/ Richard Holms

Richard Holms
Director

Distribution:

- 0 - Addressee
- 1 - DDCI
- 1 - ER
- 1 - C/EAB/OS
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

Originator:

Director of Personnel

* Concur:

C/EAB/OS

OP/RAD/ROB/[]:jat/3257 (5 March 1970)

8 SEP 1970

Mr. Ralmon N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay
Personnel Officer

Enclosures:

Questionnaire
Return Envelope

Distributions:

Original - Addressee
1 - OPF
1 - RAD Subject's File

OP/RAD/EFAB/[]:dag (31 Aug 70)

SECRET

(When Filled In)

DSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

GEF

1. SERIAL NUMBER 027630		2. NAME (LAST FIRST-MIDDLE) MIDALOO, J R JR	
3. NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		4. EFFECTIVE DATE NO. DA YR 02 03 70	
5. CATEGORY OF EMPLOYMENT P.L. 88-643 SECT. 231		6. FINANCIAL ANALYSIS No Chargeable B CSC OR OTHER LEGAL AUTHORITY	
7. FUNDS V TO V CF TO V V TO CF CF TO CF		8. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 SECTION	
9. LOCATION OF OFFICIAL STATION WASH., D.C.		10. POSITION TITLE CPS OFFICER	
11. POSITION NUMBER 1312		12. SERVICE DESIGNATION D	
13. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS		14. OCCUPATIONAL SERIES 0132.01	
15. GRADE AND STEP 12 5		16. SALARY OR RATE 15173	
17. REMARKS			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUSSIC AUPHATIC	22. STATION CODE
23. INTEGRITY CODE	24. MAJOR CODE	25. DATE OF BIRTH MO DA YR 03 27 1	26. DATE OF GRADE MO DA YR
27. DATE OF LEI MO DA YR	28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1 CSC 2 CIA 3 FICA 4 NONE
31. SEPARATION DATA CODE -7000	32. CORRECTION / CANCELLATION DATA TYPE MO DA YR	33. SECURITY REG NO	34. SER
35. VET PREFERENCE CODE 0 NONE 1 5 YR 2 10 YR	36. SERV COMP. DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAR DESV PROV TEMP
39. FEGLI - HEALTH INSURANCE CODE 0 WAIVER 1 YES	40. SOCIAL SECURITY NO	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS. 3 BREAK IN SERVICE MORE THAN 3 YRS.	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED 1 YES 2 NO	44. STATE TAX DATA FORM EXECUTED 1 YES 2 NO	45. SIGNATURE OR OTHER AUTHENTICATION	

POSTED

03-05-70/56

FORM
5-681150
Mig 10-67Use Previous
Edition

SECRET

BBG

Excluded from automatic
downgrading and
declassification

(When Filled In)

BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

OFF			
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)		
027630	HIDALGO D N JR		
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT
RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM		MO DA YR 02 28 70	REGULAR
6. FUNDS	V TO V	V TO CF	7. Financial Analysis No Chargeable
X	CF TO V	CF TO CF	8. CSC CS OTHER LEGAL AUTHORITY
			P.L. 88-643 SECT. 231
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION
OPS OFFICER		1310	D
14. CLASSIFICATION, SCHEDULE GS, (B, OR)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE
GS	0136.01	12 5	15173
18. REMARKS			
SIGNATURE OR OTHER AUTHENTICATION			

PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 2.2 OF P. 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF OCT AS PROVIDED IN THE CIV ACT OF 1949, AS AMENDED, AND A OCT EFFECTIVE DATE OF OCTOBER 1968

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORG.	FUNDS	GR-STEP	NEW SALARY
HIDALGO B N JR	027630	51	350	V	\$15,173

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS
027630	HIDALGO B N JR	51	350	V
A. OLD SALARY RATE		B. NEW SALARY RATE		C. TYPE ACTION
Grade	Step	Salary	Last Eff Date	Grade
GS 12	4	\$13,392	12/18/66	GS 12
5. EFFECTIVE DATE		6. ADJ		
12/19/68				
CERTIFICATION AND AUTHENTICATION				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.				
SIGNATURE		DATE		
<i>E. J. Farrell</i>		10 October 68		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD				
CLERK'S INITIALS				
<i>[Handwritten initials]</i>				
FORM 560 E Use previous editions				
PAY CHANGE NOTIFICATION				

CONSENTATION

UUUU

JP

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 213 OF PL 90-206 AND EXECUTIVE ORDER 11611 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$13,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$12,607

c/w #12

G 30

1. Service No.		2. Name		3. Civil Control Number		4. LWOP Hours	
027630		HICALSO B N JR		M1-390 V			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date
GS 12	3	\$11,685	12/19/65	GS 12	4	\$12,000	12/14/66
7. TYPE ACTION							
							7733
8. Remarks and Authorization							
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY <i>[Signature]</i>							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>[Signature]</i>				DATE: Dec 12 1966			
PAY CHANGE NOTIFICATION							

2644-20

P

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027630		FELIX GOBON JR.									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND CREDIBILITY SYSTEM				14160		RESEARCH					
6. FUNDS		7. TO V		8. TO C		9. CEST CENTER NO. CHARGEABLE		10. CEC OR OTHER LEGAL AUTHORITY			
X						1005-0024-1001		1043 DECT. 2003			
11. ORGANIZATIONAL DESIGNATIONS						12. LOCATION OF OFFICIAL STATION					
OUP/WH						WASH., D. C.					
13. POSITION TITLE				14. POSITION NUMBER		15. SERVICE DESIGNATION					
16. CLASSIFICATION SCHEDULE (GS, LB, MC)				17. OCCUPATIONAL SERIES		18. GRADE AND STEP		19. SALARY OR RATE			
<p>20. REMARKS: YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE RULES AND OF MR. 204.50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.</p>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE		22. EMPLOY CODE		23. OFFICE CODING		24. STATION CODE		25. INTEREST CODE		26. REASON CODE	
27. HIS SERVICES		28. SPECIAL DISTINCTION		29. RETIREMENT DATA		30. SEPARATION DATA/REASON		31. CREDITED COMMERCIAL DATA		32. MILITARY SERVICE DATA	
										33. MILITARY SERVICE DATA	
34. NET PREFERENCE		35. SERV. LEAF DATA		36. LEAF DATA		37. CREDITED COMMERCIAL DATA		38. TOTAL MILITARY SERVICE		39. MILITARY SERVICE DATA	
40. PREVIOUS GOVERNMENT SERVICE DATA				41. LEAVE DATA		42. MILITARY LEAF DATA		43. TOTAL MILITARY SERVICE		44. MILITARY SERVICE DATA	
SIGNATURE OF OFFICIAL NOTIFYING ACTION											

1950-1951

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GRADE	OLD SALARY	NEW SALARY
WILKINS H N JR	027430	51	350	V	US 12 3 11,355	11,085

6-33

1. NAME		2. GRADE		3. PAY RATE		4. PAY TYPE	
027430 WILKINS H N JR		51 350 V					
5. OLD SALARY RATE				6. NEW SALARY RATE			
7. GRADE	8. DATE	9. GRADE	10. DATE	11. GRADE	12. DATE	13. GRADE	14. DATE
05 12 2	10,987	05 12 2	12/20/64	05 12 3	11,355	05 12 3	12/1/65
<p>NO EXCESS LROP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>LROP STATUS AT END OF WAITING PERIOD</p> <p>CLERKS INITIALS _____ AUDITED BY _____</p> <p>I CERTIFY THAT THE ROPA OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE</p> <p>SIGNATURE: E. J. SCHULZ</p> <p style="text-align: center;">PAY CHANGE NOTIFICATION</p>							

JH: 17 DEC 65

SECRET
(When Filled In)

OCE												NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER				2. NAME (LAST FIRST MIDDLE)								3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE				5. CATEGORY OF EMPLOYMENT			
027630				HIDALGO B N JR								REASSIGNMENT				12 19 65				REGULAR			
6. FUNDS				7. TO				8. TO				9. COST CENTER NO (CHARGEABLE)				10. CSC OR OTHER LEGAL AUTHORITY							
X				V TO W				V TO CP				6235 0620 0000				50 USC 403 J							
11. ORGANIZATIONAL DESIGNATIONS								12. LOCATION OF OFFICIAL STATION															
DDP/WH BRANCH 2 SECTION								WASH., D.C.															
13. POSITION TITLE								14. POSITION NUMBER				15. SERVICE DESIGNATION											
OPS OFFICER								1318				D											
16. CLASSIFICATION SCHEDULE (SEE 18, 19)				17. OCCUPATIONAL SERIES				18. GRADE AND STEP				19. SALARY OR RATE											
GS				0136.01				12 3				11355											
20. REMARKS																							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																							
21. ACTION CODE		22. EMPLOY CODE		23. OFFICE CODING		24. STATION CODE		25. INTEGRAL CODE		26. RATING CODE		27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF LEI							
37		10		51350 WH		75013		1		05		27 19											
30. MTE EXPIRES		31. SPECIAL REFERENCE		32. RETIREMENT DATA		33. SEPARATION DATA CODE		34. CORRECTION/CANCELLATION DATA		35. SECURITY REQ NO		36. SEC											
NO		DA		YE		CODE		TYPE		NO		DA		YE									
37. VET PREFERENCE		38. SERV COMP DATE		39. LOOS COMP DATE		40. CAREER CATEGORY		41. TEGG / HEALTH INSURANCE		42. SOCIAL SECURITY NO													
CODE		NO		DA		YE		CODE		NO		DA		YE									
43. PREVIOUS GOVERNMENT SERVICE DATA				44. LEAVE CAT				45. FEDERAL TAX DATA				46. STATE TAX DATA											
CODE				CODE				CODE				CODE											
0 NO PREVIOUS SERVICE				0				0 NO PREVIOUS SERVICE				0											
1 NO SERVICE IN SERVICE				1				1 NO SERVICE IN SERVICE				1											
2 SERVICE IN SERVICE - LESS THAN 5 YEARS				2				2 SERVICE IN SERVICE - LESS THAN 5 YEARS				2											
3 SERVICE IN SERVICE - 5 YEARS OR MORE				3				3 SERVICE IN SERVICE - 5 YEARS OR MORE				3											
506 (ATVH) OR OTHER AUTHENTICATION																							

FORM 11-62 1150

Use Previous Edition

SECRET

For use by personnel only
Do not release

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 10 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WIDALGO R N JR.	027630	51	500	V GS 12 2	\$10,605	\$10,987

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION					
1. SERIAL NUMBER 027610		2. NAME (LAST-FIRST MIDDLE) MIDALGO R N JR			
3. NATURE OF PERSONNEL ACTION REASSIGNMENT			4. EFFECTIVE DATE 09 31 65		5. CATEGORY OF EMPLOYMENT
6. FUNDS X		V TO V	V TO G	7. COST CENTER, NO CHARGEABLE 5235 1162 0000	8. CX OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION WH C MIAMI OPS BR FI SEC			10. LOCATION OF OFFICIAL STATION WASH., D. C.		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 1145		13. CAREER SERVICE DESIGNATION U
14. CLASSIFICATION SCHEDULE (GS, LB, WH) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12	
17. SALARY OR RATE					
18. REMARKS <div style="text-align: center; margin-top: 100px;"><div style="border: 1px solid black; padding: 5px; display: inline-block;">POSTED 6-9-65 <i>HH</i></div></div>					
SIGNATURE OR OTHER AUTHENTICATION					

3CF

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
027630		HIDALGO B N JR		49 997 43F						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
<p>8. Remarks and Authorization</p> <p>/ / NO EXCESS LWOP</p> <p>/ / IN PAY STATUS AT END OF WAITING PERIOD</p> <p>/ / LWOP STATUS AT END OF WAITING PERIOD</p> <p>CLERKS INITIALS: <i>W</i> AUDITED BY</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>[Signature]</i> DATE: <i>[Signature]</i></p>										
PAY CHANGE NOTIFICATION										

DEC 22 11 06 AM '64

DEC 22 11 06 AM '64

MHC: 2 NOV 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						11 02 64		REGULAR			
6. FUNDS		X		V TO V		V TO EF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
		EF TO V		EF TO EF		5235 1162 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION						WASH., D. C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0887		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		12 1		10250			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. HOURS CODE	
37		10		49150 SAS		75013		1		05 27 19	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LST		28. CORRECTION/CANCELLATION DATA		29. SECURITY REQ NO		30. SEX	
NO DA YR		NO DA YR		NO DA YR		TYPE		NO DA YR		NO DA YR	
						EOD DATA					
31. VET. PREFERENCE		32. SERV COMP DATE		33. LONG COMP DATE		34. CAREER CATEGORY		35. FEGLI / HEALTH INSURANCE		36. SOCIAL SECURITY NO	
CODE		NO DA YR		NO DA YR		CODE		CODE		CODE	
0 - NONE						1 - YES		1 - YES		1 - YES	
1 - 5 PT						2 - NO		2 - NO		2 - NO	
2 - 10 PT											
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		CODE		CODE			
0 - NO PREVIOUS SERVICE				1 - YES		NO TAX EXEMPTIONS		1 - YES			
1 - NO BREAK IN SERVICE				2 - NO				2 - NO			
2 - BREAK IN SERVICE (LESS THAN 1 YRS)											
3 - BREAK IN SERVICE (MORE THAN 1 YRS)											
SIGNATURE OR OTHER AUTHENTICATION											
FROM: DEV COMP 2											
FOOTED											
11/22/64											

FORM 11 62 1150

Use Previous Edition

SECRET

SECRET
(When Filled In)

(When Filled In)

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

RZR: 22 APR 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
02730		HIDALGO, S N JR									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CAREER PROVISIONAL EXCEPTED APPT				MO DA YR 04 12 64		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		4232 1230 1000		50 USC 403			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						2227					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
CS				0130.01		12 1		2280			
18. REMARKS OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. MONTH CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
13	12	NUMERIC 42227	ALPHABETIC SAS	25013			MO DA YR 05 12 13	MO DA YR 12 22 63	MO DA YR 12 22 63		
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SEX	
MO DA YR		1- CSC 2- PICA 3- NONE	CODE			TYPE MO DA YR		EOD DATA 00000		M	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CODE		CODE			
0		07 11 63		03 12 63		P		1 100			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		CODE		CODE			
1				0		0		0			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 429.64 401 </div>											

FORM 11-62 1150

Old Previous Edition

28 APR 1964

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

REF: 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 027830		2. NAME (LAST-FIRST-MIDDLE) Kendall, B A Jr	
3. NATURE OF PERSONNEL ACTION RESIGNATION		4. EFFECTIVE DATE MO DA YR 04 25 64	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V X	V TO CF CF TO CF	7. COST CENTER NO. CHARGEABLE 4132 2001 1000	8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DOP/SAS US FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION		10. LOCATION OF OFFICIAL STATION JMWAVE	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0731	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LO, etc.) GS	15. OCCUPATIONAL SERIES 0136:01	16. GRADE AND STEP 12 1	17. SALARY OR RATE 9390

18. REMARKS

FILED ON
29 APR 64

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTERSEE CODE	24. HOURS CODE	25. DATE OF BIRTH MO DA YR 05 27 19	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. DATE EXPIRES MO DA YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1. CSC 2. FICR 3. NONE	31. SEPARATION DATA CODE 150001	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	33. SECURITY REQ NO		34. SEX	
35. RET. PREFERENCE 0 NONE 1 5 PT 2 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE	39. FEGLI / HEALTH INSURANCE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO			
41. PREVIOUS GOVERNMENT SERVICE DATA 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS					

SIGNATURE OR OTHER AUTHENTICATION

FILED
429-64 41

FORM 11-62 1150

Use Previous Edition

SECRET


28 APR 64

SECRET
Excluded from automatic
downgrading and
declassification

(When Filled In)

925

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
 <i>Heduligo, B. H. Jr.</i>	027630	49	730	CF GS 12 1	\$ 9,475	\$ 9,980

POSTED ON
✓ OF-40
8 JAN 1964

SECRET
(When Filled In)

300: 20 DEC 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 02753		2. NAME (LAST FIRST MIDDLE) Hidalgo, R. J.									
3. NATURE OF PERSONNEL ACTION PROMOTION						4. EFFECTIVE DATE 12/22/63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS V TO V CF TO V		V TO CF X		CF TO CF		7. COST CENTER NO. CHARGEABLE 4132 2001 1000		8. ESC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION						10. LOCATION OF OFFICIAL STATION JMWAVE					
11. POSITION TITLE OPS. OFFICER						12. POSITION NUMBER 0731		13. SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LB, PH) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 1		17. SALARY OR RATE 2475			
18. REMARKS <div style="text-align: right;">30 DEC 63</div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 22		20. EMPLOY CODE 10		21. OFFICE CODING NUMERICAL ALPHABETIC 40730 SAS		22. STATION CODE 000-00		23. INTEGREE CODE		24. HIGHER CODE 2	
25. DATE OF BIRTH 05/27/19		26. DATE OF GRADE 12/22/63		27. DATE OF LEI 12/22/63		28. DATE OF BIRTH 05/27/19		29. DATE OF GRADE 12/22/63		30. DATE OF LEI 12/22/63	
31. NTE EXPIRES NO DA YR		32. SPECIAL REFERENCE 1 CSC 2 FICA 3 NONE		33. RETIREMENT DATA CODE		34. SEPARATION DATA CODE		35. CORRECTION CANCELLATION DATA TYPE NO DA YR		36. SECURITY REQ NO.	
37. VET PREFERENCE CODE 1 NONE 2 5 PT 3 10 PT		38. SERV COMP DATE NO DA YR		39. LONG COMP DATE NO DA YR		40. CAREER CATEGORY CODE 1 YES 2 NO		41. FEGLI / HEALTH INSURANCE CODE 1 YES 2 NO		42. SOCIAL SECURITY NO.	
43. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 NO PREVIOUS SERVICE 2 NO BREAK IN SERVICE 3 BREAK IN SERVICE (LESS THAN 1 YEAR) 4 BREAK IN SERVICE (MORE THAN 1 YEAR)		44. LEAVE CAT CODE		45. FEDERAL TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		46. STATE TAX DATA FORM EXEMPTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		47. STATE CODE		48. STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION <div style="text-align: right;">12/27/63 K</div>											

FORM 1150
11 62

Use Previous
Edition

SECRET

20 DEC 1963

EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION
SCHEDULE

(When Filled In)

LLG: 25 APRIL 63

SECRET
(When Filled In)

OAB NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER 03-16-30		2. NAME (LAST FIRST MIDDLE) Hange, W. H. Jr.													
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT CAREER PROVISIONAL						4. EFFECTIVE DATE MO DA YR 04 29 63		5. CATEGORY OF EMPLOYMENT REGULAR							
6. FUNDS		7. V TO V		8. V TO CP		9. COST CENTER NO. CHARGEABLE 3132 2001 1000		10. CSC OR JIN:R LEGAL AUTHORITY 50 USC 403 J							
11. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION						12. LOCATION OF OFFICIAL STATION JMWAVE									
13. POSITION TITLE OPS OFFICER						14. POSITION NUMBER 0732		15. SERVICE DESIGNATION 0							
16. CLASSIFICATION SCHEDULE (GS, LB, etc) GS				17. OCCUPATIONAL SERIES 0136.01		18. GRADE AND STEP 11 4		19. SALARY OR RATE 8840							
20. REMARKS <div style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED ON 21-07-63 6 MAY 1963 </div> </div>															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
21. ACTION CODE 13		22. EMPLOY CODE 10		23. OFFICE CODING NUMERIC 61730 ALPHABETIC SAS		24. STATION CODE 99999		25. INTEGREE CODE 2		26. DATE OF BIRTH MO DA YR 05 27 19		27. DATE OF GRADE MO DA YR 03 17 58		28. DATE OF LEI MO DA YR 09 16 62	
29. NTE EXPIRES MO DA YR		30. SPECIAL REFERENCE		31. RETIREMENT DATA 1 LSC 2 FICA 3 NONE		32. SEPARATION DATA CODE		33. CORRECTION/CANCELLATION DATA TYPE MO DA YR		34. SECURITY REQ NO 27630		35. SEX MI		36. SOCIAL SECURITY NO	
37. VET. PREFERENCE CODE 0 0 NONE 1 5 YR 2 10 YR		38. SERV. COMP. DATE MO DA YR 07 16 63		39. LONG. COMP. DATE MO DA YR 17 58		40. CAREER CATEGORY CAN. ACCT. TEMP P		41. FEDERAL TAX DATA FORM EXECUTED CODE 1 YES 2 NO		42. STATE TAX DATA FORM EXECUTED CODE 1 YES 2 NO		43. SOCIAL SECURITY NO		44. STATE TAX DATA	
45. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)		46. LEAVE CAT. CODE 8		47. FEDERAL TAX DATA FORM EXECUTED CODE 1 YES 2 NO		48. STATE TAX DATA FORM EXECUTED CODE 1 YES 2 NO		49. SOCIAL SECURITY NO		50. STATE TAX DATA		51. SOCIAL SECURITY NO		52. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION															
<div style="display: flex; justify-content: space-between; align-items: center;"> <div> <p>FORM 1150 11-62</p> <p>Use Previous Edition</p> </div> <div> <p>SECRET 25 APR 1963</p> </div> <div> <p>POSTED 11/07/63 WK</p> </div> </div>															

FORM 1150
11-62

Use Previous Edition

SECRET 25 APR 1963

14-811
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

(When Filled In)

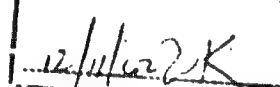
SECRET
(When Filled In)

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027030		HIDALGO E N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION						04 27 63		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		3232 1000 1000									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0692		D			
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE		
GS			0136.01			11 4			8940		
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATUS CODE		23. INTEGREE CODE		24. REGIONS CODE	
45		10									
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LBI		28. DATE OF BIRTH		29. DATE OF GRADE		30. DATE OF LBI	
05 27 19											
31. DATE OF BIRTH		32. DATE OF GRADE		33. DATE OF LBI		34. DATE OF BIRTH		35. DATE OF GRADE		36. DATE OF LBI	
37. DATE OF BIRTH		38. DATE OF GRADE		39. DATE OF LBI		40. DATE OF BIRTH		41. DATE OF GRADE		42. DATE OF LBI	
43. DATE OF BIRTH		44. DATE OF GRADE		45. DATE OF LBI		46. DATE OF BIRTH		47. DATE OF GRADE		48. DATE OF LBI	
49. DATE OF BIRTH		50. DATE OF GRADE		51. DATE OF LBI		52. DATE OF BIRTH		53. DATE OF GRADE		54. DATE OF LBI	
55. DATE OF BIRTH		56. DATE OF GRADE		57. DATE OF LBI		58. DATE OF BIRTH		59. DATE OF GRADE		60. DATE OF LBI	
61. DATE OF BIRTH		62. DATE OF GRADE		63. DATE OF LBI		64. DATE OF BIRTH		65. DATE OF GRADE		66. DATE OF LBI	
67. DATE OF BIRTH		68. DATE OF GRADE		69. DATE OF LBI		70. DATE OF BIRTH		71. DATE OF GRADE		72. DATE OF LBI	
73. DATE OF BIRTH		74. DATE OF GRADE		75. DATE OF LBI		76. DATE OF BIRTH		77. DATE OF GRADE		78. DATE OF LBI	
79. DATE OF BIRTH		80. DATE OF GRADE		81. DATE OF LBI		82. DATE OF BIRTH		83. DATE OF GRADE		84. DATE OF LBI	
85. DATE OF BIRTH		86. DATE OF GRADE		87. DATE OF LBI		88. DATE OF BIRTH		89. DATE OF GRADE		90. DATE OF LBI	
91. DATE OF BIRTH		92. DATE OF GRADE		93. DATE OF LBI		94. DATE OF BIRTH		95. DATE OF GRADE		96. DATE OF LBI	
97. DATE OF BIRTH		98. DATE OF GRADE		99. DATE OF LBI		100. DATE OF BIRTH		101. DATE OF GRADE		102. DATE OF LBI	
103. DATE OF BIRTH		104. DATE OF GRADE		105. DATE OF LBI		106. DATE OF BIRTH		107. DATE OF GRADE		108. DATE OF LBI	
109. DATE OF BIRTH		110. DATE OF GRADE		111. DATE OF LBI		112. DATE OF BIRTH		113. DATE OF GRADE		114. DATE OF LBI	
115. DATE OF BIRTH		116. DATE OF GRADE		117. DATE OF LBI		118. DATE OF BIRTH		119. DATE OF GRADE		120. DATE OF LBI	
121. DATE OF BIRTH		122. DATE OF GRADE		123. DATE OF LBI		124. DATE OF BIRTH		125. DATE OF GRADE		126. DATE OF LBI	
127. DATE OF BIRTH		128. DATE OF GRADE		129. DATE OF LBI		130. DATE OF BIRTH		131. DATE OF GRADE		132. DATE OF LBI	
133. DATE OF BIRTH		134. DATE OF GRADE		135. DATE OF LBI		136. DATE OF BIRTH		137. DATE OF GRADE		138. DATE OF LBI	
139. DATE OF BIRTH		140. DATE OF GRADE		141. DATE OF LBI		142. DATE OF BIRTH		143. DATE OF GRADE		144. DATE OF LBI	
145. DATE OF BIRTH		146. DATE OF GRADE		147. DATE OF LBI		148. DATE OF BIRTH		149. DATE OF GRADE		150. DATE OF LBI	
151. DATE OF BIRTH		152. DATE OF GRADE		153. DATE OF LBI		154. DATE OF BIRTH		155. DATE OF GRADE		156. DATE OF LBI	
157. DATE OF BIRTH		158. DATE OF GRADE		159. DATE OF LBI		160. DATE OF BIRTH		161. DATE OF GRADE		162. DATE OF LBI	
163. DATE OF BIRTH		164. DATE OF GRADE		165. DATE OF LBI		166. DATE OF BIRTH		167. DATE OF GRADE		168. DATE OF LBI	
169. DATE OF BIRTH		170. DATE OF GRADE		171. DATE OF LBI		172. DATE OF BIRTH		173. DATE OF GRADE		174. DATE OF LBI	
175. DATE OF BIRTH		176. DATE OF GRADE		177. DATE OF LBI		178. DATE OF BIRTH		179. DATE OF GRADE		180. DATE OF LBI	
181. DATE OF BIRTH		182. DATE OF GRADE		183. DATE OF LBI		184. DATE OF BIRTH		185. DATE OF GRADE		186. DATE OF LBI	
187. DATE OF BIRTH		188. DATE OF GRADE		189. DATE OF LBI		190. DATE OF BIRTH		191. DATE OF GRADE		192. DATE OF LBI	
193. DATE OF BIRTH		194. DATE OF GRADE		195. DATE OF LBI		196. DATE OF BIRTH		197. DATE OF GRADE		198. DATE OF LBI	
199. DATE OF BIRTH		200. DATE OF GRADE		201. DATE OF LBI		202. DATE OF BIRTH		203. DATE OF GRADE		204. DATE OF LBI	
205. DATE OF BIRTH		206. DATE OF GRADE		207. DATE OF LBI		208. DATE OF BIRTH		209. DATE OF GRADE		210. DATE OF LBI	
211. DATE OF BIRTH		212. DATE OF GRADE		213. DATE OF LBI		214. DATE OF BIRTH		215. DATE OF GRADE		216. DATE OF LBI	
217. DATE OF BIRTH		218. DATE OF GRADE		219. DATE OF LBI		220. DATE OF BIRTH		221. DATE OF GRADE		222. DATE OF LBI	
223. DATE OF BIRTH		224. DATE OF GRADE		225. DATE OF LBI		226. DATE OF BIRTH		227. DATE OF GRADE		228. DATE OF LBI	
229. DATE OF BIRTH		230. DATE OF GRADE		231. DATE OF LBI		232. DATE OF BIRTH		233. DATE OF GRADE		234. DATE OF LBI	
235. DATE OF BIRTH		236. DATE OF GRADE		237. DATE OF LBI		238. DATE OF BIRTH		239. DATE OF GRADE		240. DATE OF LBI	
241. DATE OF BIRTH		242. DATE OF GRADE		243. DATE OF LBI		244. DATE OF BIRTH		245. DATE OF GRADE		246. DATE OF LBI	
247. DATE OF BIRTH		248. DATE OF GRADE		249. DATE OF LBI		250. DATE OF BIRTH		251. DATE OF GRADE		252. DATE OF LBI	
253. DATE OF BIRTH		254. DATE OF GRADE		255. DATE OF LBI		256. DATE OF BIRTH		257. DATE OF GRADE		258. DATE OF LBI	
259. DATE OF BIRTH		260. DATE OF GRADE		261. DATE OF LBI		262. DATE OF BIRTH		263. DATE OF GRADE		264. DATE OF LBI	
265. DATE OF BIRTH		266. DATE OF GRADE		267. DATE OF LBI		268. DATE OF BIRTH		269. DATE OF GRADE		270. DATE OF LBI	
271. DATE OF BIRTH		272. DATE OF GRADE		273. DATE OF LBI		274. DATE OF BIRTH		275. DATE OF GRADE		276. DATE OF LBI	
277. DATE OF BIRTH		278. DATE OF GRADE		279. DATE OF LBI		280. DATE OF BIRTH		281. DATE OF GRADE		282. DATE OF LBI	
283. DATE OF BIRTH		284. DATE OF GRADE		285. DATE OF LBI		286. DATE OF BIRTH		287. DATE OF GRADE		288. DATE OF LBI	
289. DATE OF BIRTH		290. DATE OF GRADE		291. DATE OF LBI		292. DATE OF BIRTH		293. DATE OF GRADE		294. DATE OF LBI	
295. DATE OF BIRTH		296. DATE OF GRADE		297. DATE OF LBI		298. DATE OF BIRTH		299. DATE OF GRADE		300. DATE OF LBI	
301. DATE OF BIRTH		302. DATE OF GRADE		303. DATE OF LBI		304. DATE OF BIRTH		305. DATE OF GRADE		306. DATE OF LBI	
307. DATE OF BIRTH		308. DATE OF GRADE		309. DATE OF LBI		310. DATE OF BIRTH		311. DATE OF GRADE		312. DATE OF LBI	
313. DATE OF BIRTH		314. DATE OF GRADE		315. DATE OF LBI		316. DATE OF BIRTH		317. DATE OF GRADE		318. DATE OF LBI	
319. DATE OF BIRTH		320. DATE OF GRADE		321. DATE OF LBI		322. DATE OF BIRTH		323. DATE OF GRADE		324. DATE OF LBI	
325. DATE OF BIRTH		326. DATE OF GRADE		327. DATE OF LBI		328. DATE OF BIRTH		329. DATE OF GRADE		330. DATE OF LBI	
331. DATE OF BIRTH		332. DATE OF GRADE		333. DATE OF LBI		334. DATE OF BIRTH		335. DATE OF GRADE		336. DATE OF LBI	
337. DATE OF BIRTH		338. DATE OF GRADE		339. DATE OF LBI		340. DATE OF BIRTH		341. DATE OF GRADE		342. DATE OF LBI	
343. DATE OF BIRTH		344. DATE OF GRADE		345. DATE OF LBI		346. DATE OF BIRTH		347. DATE OF GRADE		348. DATE OF LBI	
349. DATE OF BIRTH		350. DATE OF GRADE		351. DATE OF LBI		352. DATE OF BIRTH		353. DATE OF GRADE		354. DATE OF LBI	
355. DATE OF BIRTH		356. DATE OF GRADE		357. DATE OF LBI		358. DATE OF BIRTH		359. DATE OF GRADE		360. DATE OF LBI	
361. DATE OF BIRTH		362. DATE OF GRADE		363. DATE OF LBI		364. DATE OF BIRTH		365. DATE OF GRADE		366. DATE OF LBI	
367. DATE OF BIRTH		368. DATE OF GRADE		369. DATE OF LBI		370. DATE OF BIRTH		371. DATE OF GRADE		372. DATE OF LBI	
373. DATE OF BIRTH		374. DATE OF GRADE		375. DATE OF LBI		376. DATE OF BIRTH		377. DATE OF GRADE		378. DATE OF LBI	
379. DATE OF BIRTH		380. DATE OF GRADE		381. DATE OF LBI		382. DATE OF BIRTH		383. DATE OF GRADE		384. DATE OF LBI	
385. DATE OF BIRTH		386. DATE OF GRADE		387. DATE OF LBI		388. DATE OF BIRTH		389. DATE OF GRADE		390. DATE OF LBI	
391. DATE OF BIRTH		392. DATE OF GRADE		393. DATE OF LBI		394. DATE OF BIRTH		395. DATE OF GRADE		396. DATE OF LBI	
397. DATE OF BIRTH		398. DATE OF GRADE		399. DATE OF LBI		400. DATE OF BIRTH		401. DATE OF GRADE		402. DATE OF LBI	
403. DATE OF BIRTH		404. DATE OF GRADE		405. DATE OF LBI		406. DATE OF BIRTH		407. DATE OF GRADE		408. DATE OF LBI	
409. DATE OF BIRTH		410. DATE OF GRADE		411. DATE OF LBI		412. DATE OF BIRTH		413. DATE OF GRADE		414. DATE OF LBI	
415. DATE OF BIRTH		416. DATE OF GRADE		417. DATE OF LBI		418. DATE OF BIRTH		419. DATE OF GRADE		420. DATE OF LBI	
421. DATE OF BIRTH		422. DATE OF GRADE		423. DATE OF LBI		424. DATE OF BIRTH		425. DATE OF GRADE		426. DATE OF LBI	
427. DATE OF BIRTH		428. DATE OF GRADE		429. DATE OF LBI		430. DATE OF BIRTH		431. DATE OF GRADE		432. DATE OF LBI	
433. DATE OF BIRTH		434. DATE OF GRADE		435. DATE OF LBI		436. DATE OF BIRTH		437. DATE OF GRADE		438. DATE OF LBI	
439. DATE OF BIRTH		440. DATE OF GRADE		441. DATE OF LBI		442. DATE OF BIRTH		443. DATE OF GRADE		444. DATE OF LBI	
				</							

ABM: 20 NOV 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)										
027630		HICALGO B N JR										
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT						11 20 62		REGULAR				
6. FUNDS						7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY				
X						3232 1000 1000		50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION						
DDP TASK FORCE "W" FI-CI BRANCH						WASH., D. C.						
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION				
CPS OFFICER						0682		D				
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS				0136.01		11 4		8840				
18. REMARKS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTELLIGENCE CODE	24. MAJORITY CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEL	
37	10	61300	TFW	75013		1	MO	DA	YR	MO	DA	YR
							05	27	19			
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SEC.		
MO DA YR		1. CSC 2. OFFICE 3. NONE		CODE		TYPE MO DA YR		FOD DATA				
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE	38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO			
CODE		MO DA YR		MO DA YR	CODE		CODE		CODE			
0 - NONE 1 - 5 PT 2 - 10 PT					CAN. ENCL. PAID. TEMP.		0 - WAIVER 1 - YES		HEALTH INS. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE				CODE		CODE		CODE				
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO		NO TAX EXEMPTIONS		FORM EXECUTED 1 - YES 2 - NO				
SIGNATURE OR OTHER AUTHENTICATION												
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED  </div>												

FORM 462 1150

Use Previous Edition

SECRET

1150
Include this form in
your report and
record it as 1150

(When Filled In)

16-811

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
 DC MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.
 EFFECTIVE 14 OCTOBER 1962

NAME	SERIAL	ORGN	FUNDS	OLD GRST SALARY	NEW GRST SALARY
HIDALGO B N JR	027630	64075	V 11 4	\$ 8340	\$ 8840

235-1000

1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours	
027630		HIDALGO B N JR		64 075 V /			
5 OLD SALARY RATE				6 NEW SALARY RATE			
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date
S 11	3	\$ 8,080	03/19/61	S 11	4	\$ 8,340	09/16/62
7 TYPE ACTION							
8 Remarks and Authorization <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD </div> <div> CLERKS INITIALS <i>INC</i> AUDITED BY <i>[Signature]</i> </div> </div>							
PAY CHANGE NOTIFICATION							

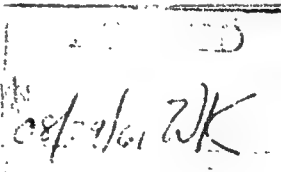
AES: 17 JAN 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
OCF																	
1. SERIAL NUMBER: 2. NAME (LAST-FIRST-MIDDLE)																	
027630 HIDALGO B N JR																	
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT									
REASSIGNMENT						01 17 62		REGULAR									
6. FUNDS						7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY									
X						2235 1000 1000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DDP WH PLANS & OPERATIONS STAFF SECTION A						WASH., D.C.											
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION									
OPS OFFICER						0641		D									
14. CLASSIFICATION SCHEDULE (GS, LB, MC)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE								
GS			0136.01			11 3			8080								
18. REMARKS																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE		24. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37		10		64075 WH		75013		1		05 27 19							
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SER					
										EOD DATA							
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/LEI		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT				43. FEDERAL TAX DATA				44. STATE TAX DATA					
SIGNATURE OR OTHER AUTHENTICATION																	
1/18/62 Jm																	

ARE:18 AUG 1961

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
027630		HIDALGO B N JR							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					08 20 61		REGULAR		
6. FUNDS		7. TO V		8. V TO CF		9. COST CENTER NO CHARGEABLE		10. CAC OR OTHER LEGAL AUTHORITY	
X		U TO V		CF TO CF		2635 5000 8021		50 USC 403 J	
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION				
DDP WH BRANCH 4 FI CI SECTION					WASH., D. C.				
13. POSITION TITLE					14. POSITION NUMBER		15. CAPTER SERVICE DESIGNATION		
OPS OFFICER					0681		D		
16. CLASSIFICATION (GPO, ISS, etc.)			17. PAY GRADE		18. GRADE AND STEP		19. SALARY OR RATE		
GS			0136.01		11 3		8060		
20. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
21. ACTION CODE		22. OFFICE CODING		23. STATION CODE		24. INTEGRITY CODE		25. DATE OF BIRTH	
16		10		64450 WH		75013		1 05 27 19	
26. NTE EXPIRES		27. SPECIAL REFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA CODE		30. CORRECTION/CANCELLATION DATA	
NO DA 10		1- LSC 2- PFC 3- NONE		CODE		TYPE NO DA 10		31. SECURITY REQ NO	
32. NET PREFERENCE		33. SERV COMP DATE		34. LONG COMP DATE		35. MIL SERV CREDIT/LED		36. PEGEL/HEALTH INSURANCE	
CODE 0- NONE 1- 0-PT 2- 1-PT		NO DA 10		NO DA 10		CODE 0- YES 1- NO		CODE 0- YES 1- NO	
37. PREVIOUS GOVERNMENT SERVICE DATA				38. LEAVE CAT				39. FEDERAL TAX DATA	
CODE 0- NO PREVIOUS SERVICE 1- NO SERVICE 2- SERVICE (LESS THAN 12 MOS) 3- SERVICE (MORE THAN 12 MOS)				CODE 0- YES 1- NO				CODE 0- YES 1- NO	
40. STATE TAX DATA									
CODE NO TAX STATE CODE EXEMP									
SIGNATURE OR OTHER AUTHENTICATION									
									

SECRET
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours					
527630		HIDALGO R N JR		DDP/WH 3A UV							
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI	
GS	11	2	7,820	09/20/59	11	3	8,040	04/19/61			
8. Remarks and Authentication											
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p> <p align="center">ENCLOSURE WK</p> <p align="center">PAY CHANGE NOTIFICATION</p>											

Form 560

Obsolete Previous Edition

SECRET

(GPO)

L-1

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/21/64

1. SERIAL NUMBER

2. NAME (Last, First, Middle)

027630

MICALGO R N JR

3. NATURE OF PERSONNEL ACTION

4. EFFECTIVE DATE

5. CATEGORY OF EMPLOYMENT

CONV. TO CAREER EMPLOYEE STATUS

03 17 61

6. FUNDS

7. TO V

8. TO G

9. COST CENTER NO. (CHARGEABLE)

10. CM OR OTHER LEGAL AUTHORITY

11. ORGANIZATIONAL DESIGNATION

DDP/SAS

12. LOCATION OF OFFICIAL STATION

13. POSITION TITLE

14. POSITION NUMBER

15. CAREER OR 16. DESIGNATION

U

17. CLASSIFICATION SCHEDULE (45, 18, 19)

20. OCCUPATIONAL SERIES

21. GRADE AND STEP

22. SALARY OR RATE

23. REMARKS

SIGNATURE OR OTHER AUTHENTICATION

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-566 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

/S/

EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960										NOTIFICATION OF PERSONNEL ACTION									
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth		4. Sex		5. SSN		6. CS-FOO							
527630		HIDALGO B N JR				05 27 19		M		1		03 17 58							
7. SCID		8. CSC Permit		9. CSC Or Other Legal Authority				10. Appt. Affidvt		11. FEGLI		12. LFD		13. Special					
07 16 46		No-2 1		50 USCA 403 J				Mo Da Yr		Mo Da Yr		Mo Da Yr		No-2					

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDS OTR OPERATIONS SCHOOL COVERT TRAINING				1172		WASH., D. C.				75013	
16. Duty Field		17. Position Title		18. Position No.		19. Serv		20. Occup. Series			
Dept - 1 Unit - 3 Frm - 5		3 INSTRUCTOR OPERS		1014		02		1711.50			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grd Mo		25. PSI Dgt		26. Appropriation Number	
11 2		\$ 7270		D		03 17 58		09 20 59		9 7500 30 018	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT		57		04 24 60		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP WH BRANCH 4				4617		WASH., D. C.				75013	
33. Duty Field		34. Position Title		35. Position No.		36. Serv		37. Occup. Series			
Dept - 1 Unit - 3 Frm - 5		1 OPS OFFICER		0626		05		0136.01			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grd Mo		42. PSI Dgt		43. Appropriation Number	
11 2		\$ 7270		D		03 17 58		03 19 60		0135 1000 1000	

44. Remarks

06-22-60 J.K.

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED GRADE		4. FOLDER		5. ALLOTMENT	
527630		MIDALGO B H JK		DDS/TRNG 21		UV			
6. OLD SALARY RATE					7. NEW SALARY RATE				
GRADE	STEP	SALARY	LAST EFFECTIVE DATE		GRADE	STEP	SALARY	EFFECTIVE DATE	
GS 11	1	\$ 7,000	03	17 56	GS 11	2	\$ 7,270	09	20 59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER									
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP					9. NUMBER OF HOURS LWOP				
IF EXCESS LWOP, CHECK FOLLOWING: <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD					10. INITIALS OF CLERK				
11. AUTHORIZED BY					11. AUTHORIZED BY				
TO BE COMPLETED BY THE OFFICE OF PERSONNEL									
12. PROJECTED SALARY RATE AND EFFECTIVE DATE					13. REMARKS				
GRADE	STEP	SALARY	EFFECTIVE DATE		L 756.				
14. AUTHENTICATION									
<div style="text-align: center; font-size: 2em; opacity: 0.5;">SECRET</div> <div style="position: absolute; right: 0; bottom: 0; text-align: right;"> PL 9/2/59 MC 4/6/59 VII </div>									

PERIODIC STEP INCREASE - AUTHENTICATION

FORM NO. 560a

SECRET

PERSONNEL FOLDER

(6)

SECRET

JEC:12 JUNE 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No. 527630	2. Name (Last-First-Middle) HIDALGO B N JR	3. Date Of Birth Mo. 05 Da. 27 Yr. 19	4. Vet. Pref. Non-O Code 5 Pt-1 1 10 Pt-2	5. Sex M	6. CSC: PSC Mo. 03 Da. 17 Yr. 55
7. SCD Mo. 07 Da. 16 Yr. 46	8. CSC Reas. Yes-1 Code No-2 1	9. CSC Or Other Legal Authority 50 USCA 403.8	10. Appr. Authority Mo. 07 Da. 16 Yr. 46	11. FEGLI Yes-1 Code No-2 1	12. LCD Mo. 03 Da. 17 Yr. 55
			13. Grade Code Yes-1 Code No-2 2		

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP WH BRANCH 1P1 CENTRAL AMERICA SECTION		Code 4613	15. Location Of Official Station WASH., D.C.		Station Code 75013
16. Dept. Field Dept. - 1 Unit - 3 Fgn. - 5	17. Position Title Code 2 AREA OPS OF	18. Position No. 0486		19. Serv. GS	20. Occup. Series 0136.01
21. Grade & Step 11 1	22. Salary Or Rate \$ 7030	23. SD D	24. Date Of Grade Mo. 03 Da. 17 Yr. 55		25. App. Date Mo. 09 Da. 20 Yr. 57
			26. Appropriation Number 8 3500 20		

ACTION

27. Feature Of Action REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS	Code 05	28. Eff. Date Mo. 06 Da. 14 Yr. 59	29. Type Of Employee REGULAR	Code 01	30. Separation Data
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PRESENT ASSIGNMENT

31. Organizational Designations DDS OTR OPERATIONS SCHOOL COVERT TRAINING		Code 1172	32. Location Of Official Station WASH., D. C.		Station Code 75013
33. Dept. Field Dept. - 1 Unit - 3 Fgn. - 5	34. Position Title Code 3 INSTRUCTOR EXPERS	35. Position No. 1914		36. Serv. GS	37. Occup. Series 1711.50
38. Grade & Step 11 1	39. Salary Or Rate \$ 7030	40. SD D	41. Date Of Grade Mo. 03 Da. 17 Yr. 55		42. App. Date Mo. 09 Da. 20 Yr. 57
			43. Appropriation Number 9 7500 20 018		

44. Remarks

POSTED

CP

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 6,390	\$ 7,030

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

VL 16 MAY 58

1. Serial No.		2. Name (Last-First-Middle)		3. Date Of Birth			4. Vet. Prof.		5. Sex		6. GS - EOD		
127630		BALMES N. HIDALGO, JR.		Mo.	Da.	Yr.	Non-10	Code		Mo.	Da.	Yr.	
		HIDALGO B N JR		05	27	19	5 Pt-1	1	M	1	03	17	58
7. SCD		8. CSC Reent.		9. CSC Or Other Legal Authority		10. Appt. Affidav.		11. FEGLI		12. LCD		13. ...	
Mo.	Da.	Yr.	Yes-1	Code		Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.
07	16	16	No-2	1		03	13	58	No-2	1	03	17	58
50 USCA 403.4													

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code		15. Location Of Official Station		Station Code	
16. Dept. - Field		17. Position Title		18. Position No.		19. Serv. 20. Occup. Series	
Dept. - 2	Code						
USStd. - 4							
Frqn. - 6							
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade 25. PSI Due	
		\$				Mo. Da. Yr. Mo. Da. Yr.	
						26. Appropriation Number	

ACTION

27. Nature Of Action		Code		28. EP Date		29. Type Of Employee		Code		30. Separation Data	
EXCEPTED APPOINTMENT CORRECTION*		12		03 17 58		REGULAR		01			

PRESENT ASSIGNMENT

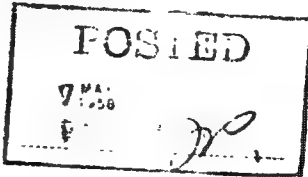
31. Organizational Designations		Code		32. Location Of Official Station		Station Code	
DDP WH BRANCH 111 CENTRAL AMERICA SECTION		4613		WASH., D.C.		175013	
33. Dept. - Field		34. Position Title		35. Position No.		36. Serv. 37. Occup. Series	
Dept. - 9	Code						
USStd. - 4							
Frqn. - 6							
2 AREA OPS OF				0486		GS 0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade 42. PSI Due	
11 1		\$ 6300				Mo. Da. Yr. Mo. Da. Yr.	
						11 17 58 03 22 59	
44. Remarks							
*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READ BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.							

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION														
LVL 17 MAR 58														
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vol. Pref		5. Sex		6. CS - EOD	
127630		BALMES N. HIDALGO HIDALGO BALMES N				Mo. Da. Yr. 05 27 19			None-0 5 Pt-1 10 Pt-2		Code 1		Mo. Da. Yr. 03 17 58	
7. SCD		8. CSC Point		9. CSC Or Other Legal Authority		10. Appt. Affidav.			11. FEGLI		12. LCD		13. Mil. Serv. Credit, Etc.	
Mo. Da. Yr. 07 16 56		Yes-1 No-2		Code 1		50 USCA 403		Mo. Da. Yr. 03 13 53			Yes-1 No-2		Code 1	

PREVIOUS ASSIGNMENT														
14. Organizational Designations					Code		15. Location Of Official Station					Station Code		
16. Dept - Field		17. Position Title			18. Position No.			19. Serv.		20. Occup. Series				
Dept - 8 USMld - 4 Frgr - 5		Code												
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade			25. PSI Due		26. Appropriation Number			
		\$				Mo. Da. Yr.			Mo. Da. Yr.					

ACTION														
27. Nature Of Action			Code		28. Eff. Date		29. Type Of Employee			Code		30. Separation Data		
EXCEPTED APPOINTMENT			13		03 117 158		REGULAR			01				

PRESENT ASSIGNMENT														
31. Organizational Designations					Code		32. Location Of Official Station					Station Code		
DDP WH BRANCH 111 CENTRAL AMERICA SECTION					4613		WASH., D.C.					75013		
33. Dept - Field		34. Position Title			35. Position No.			36. Serv.		37. Occup. Series				
Dept - 8 USMld - 4 Frgr - 6		Code			0486			US		0136.01				
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade			42. PSI Due		43. Appropriation Number			
11 1		\$ 6200		D		Mo. Da. Yr. 03 117 158			Mo. Da. Yr. 09 120 153		8 3500 2L			
44. Remarks														
<div align="center">  </div>														

FITNESS RPTS

1966 - 1969

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) HIDALGO, RAFAEL, JR.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/ FIC	8. CURRENT STATION Headquarters	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 15 March - 31 October 1965		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.					RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and					RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.					RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.					RATING LETTER S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B if provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p>			
<p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p>			
<p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT WAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/NH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with one exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/NH/C/MO	Walter T. Cini <i>[Signature]</i>	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
HIDALGO, Balmes N.			27 May 1919	M	12 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Ops Officer			DDP/SAS Washington		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> SPECIAL (Specify): <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
31 January 1965			9 April 1964--15 March 1965		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.					RATING LETTER S
SPECIFIC DUTY NO. 2 Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.					RATING LETTER P
SPECIFIC DUTY NO. 3 Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).					RATING LETTER S
SPECIFIC DUTY NO. 4 Served as case officer for a counterintelligence operation (the agent was located [redacted]) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER S
29 MAR 1965					

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p>			
<p>Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.</p>			
<p>Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, memoranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.</p>			
<p>Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1.		BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	23 March 65	SIGNATURE OF EMPLOYEE	<i>[Signature]</i>
2.		BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	11 Months	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE	23 March 1965	OFFICIAL TITLE OF SUPERVISOR	WH/SA/CI/COPS
		TYPED OR PRINTED NAME AND SIGNATURE Richard Tansing	
3.		BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL			
<p>Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.</p>			
DATE	23 March 65	OFFICIAL TITLE OF REVIEWING OFFICIAL	C WH/SA CI (WH/C/SP)
		TYPED OR PRINTED NAME AND SIGNATURE Harold F. Swenson	

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) [REDACTED]		2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11	5. SD D
6. OFFICIAL POSITION TITLE OPS OFFICER		7. OFF/DIV/BR OF ASSIGNMENT IDP/S.I.S.		8. CURRENT STATION JMWAVE	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/> SPECIAL (Specify): Promotion			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to) 6 May 1963 to 5 September 1963			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.					S
SPECIFIC DUTY NO. 2 To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [REDACTED] DEB					S
SPECIFIC DUTY NO. 3 To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.					P
SPECIFIC DUTY NO. 4 To prepare and present to his immediate supervisor completed interrogation reports.					P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
27 SEP 1963					S

(Star Filled In)

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind the importance of their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

The person being rated is a conscientious devoted ^{SEP 28 2 00 PM '44} ~~man~~ ^{mail room} who has demonstrated an extraordinary ability to get along with his co-workers and other ODOKE representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KODESK effort of the Station.

The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KIJUMP interrogators [redacted] and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of

CERTIFICATION AND COMMENTS

effort.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE _____

SIGNATURE OF EMPLOYEE

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4 months

At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.

DATE _____

OFFICIAL TITLE OF SUPERVISOR

1. TYPED OR PRINTED NAME AND SIGNATURE

4 September 1963

Chief, CI Branch, JMWAVE

/s/ Neil T. PICKWORTH
(signed in pseudo on Fld. Trans.)

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.

DATE _____

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPE OR PRINTED NAME AND SIGNATURE

18 September 1963

Chief of Station, JMWAVE

1a/ Andrew L. REUTEMAN

(signed in pseudo on Fld. Track.)

SÈCRET

SECRET
(When Filled In)

<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;"> SECTION A 1. NAME (Last) (First) (Middle) HIDALGO, BALMES </div> <div style="text-align: center;"> FITNESS REPORT </div> <div style="text-align: right;"> EMPLOYEE SERIAL NUMBER 027630 </div> </div>			
GENERAL			
2. DATE OF BIRTH 27 May 1919		3. SEX M	4. GRADE GS-11
5. OFFICIAL POSITION TITLE Ops Officer		6. CURRENT STATION DDP WH P&O SEC A.	
7. CHECK (X) TYPE OF APPOINTMENT <input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):		8. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):	
9. DATE REPORT DUE IN O.P. 30 October 1962		10. REPORTING PERIOD (From - to) 17 Jan 62 - 30 Sep 62	
SECTION B PERFORMANCE EVALUATION			
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>			
SPECIFIC DUTIES			
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).			RATING LETTER
SPECIFIC DUTY NO. 1 Responsible for initiation and development of WH Division durable assets program.			P
SPECIFIC DUTY NO. 2 Collate and maintain files on espionage laws of LA countries.			P
SPECIFIC DUTY NO. 3 Served as interpreter and translator for Division LA contacts.			P
SPECIFIC DUTY NO. 4 Coordinated with Branch 1 of WHD on FI and CI matters.			P
SPECIFIC DUTY NO. 5 Gives lectures as guest instructor to students attending School of International Communism.			S
SPECIFIC DUTY NO. 6 			RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION			
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.			RATING LETTER P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 18 Sept 62	SIGNATURE OF EMPLOYEE <i>Albert L. Hidalgo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 18 September 1962	OFFICIAL TITLE OF SUPERVISOR C/WH/PO/A	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i>
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I have had insufficient personal contact with Subject to make any meaningful comments.		
DATE 13 September 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/OPS	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i>

SECRET

SECRET
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

Hidalgo, Balmeo

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation). |
| <input checked="" type="checkbox"/> | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). <i>N.A.</i> |
| | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954). |
| <input checked="" type="checkbox"/> | 4. Standard Form 2802 (Application for Refund of Retirement Deductions).
<i>Medical Disability</i> |
| <input checked="" type="checkbox"/> | 5. Form 2535 (Authorization for Disposition of Paychecks).
<i>NO CHANGE</i> |
| | 6. Applicable to returnee (resignee from overseas assignment).
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.
<input type="checkbox"/> Appointment arranged with Office of Medical Services.
<input type="checkbox"/> Appointment for Office of Medical Services examination declined. |
| | 7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment. |
| | 8. Form 71 (Application for Leave). |
| | 9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty). |
| | 10. Instructions for returning to duty from Extended Leave or Active Military Service. |

Signature of Employee

Robert A. Hidalgo

Date Signed

FEB 27, 1970

Address (Street, City, State, Zip Code)

403 SILVER ROCK RD ROCKVILLE MD 20851

Correspondence

☒ Overt

☐ Covert

*OR 90 VERMONT HIGHLAND
X6646*

SECRET

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in **BOTH COPIES** of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) (first) (middle) DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER
HEDALOU Jr. Balnes Hieves May 27 1919
Employee Serial Number 27630
EMPLOYING DEPARTMENT OR AGENCY LOCATION (City, State, ZIP Code)

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance

☒
(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

☐
(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance

☐
(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4 SIGN AND DATE IF YOU MARKED BOX "A" OR "C".
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1963

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
FEB 20 3 30 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-7
JANUARY 1958
(for use only until April 14, 1968)
176-101

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

WASHINGTON, D.C.

(Bureau or division)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

17 Mar 58

(Date of entrance on duty)

Balme Hidalgo Jr.
(Signature of appointee)

Subscribed and sworn before me this 13th day of March, A. D. 1958.

at Washington,
(City)

D.C.
(State)

[SEAL]

Billy A. Bussard 6 Feb 1958
(Signature of officer)
Appointment Clerk
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (street and number, city and State)
7615 B. T. McArthur Blvd. NW - Wash. 16, D. C.

2. (A) DATE OF BIRTH 27 May 1919 (B) PLACE OF BIRTH (city and State or city and foreign country)
Highland, Ohio

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY Louise Houdge (B) RELATIONSHIP Wife (C) STREET AND NUMBER, CITY AND STATE _____ (D) TELEPHONE NO. _____

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, OR A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO
 If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. STAT. (6 mos. & over)	SIN. DATE (6 mos. & over)

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
5. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OBE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give details in Item 12.			11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT:		
7. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give details in Item 12.			(1) YOUR CONDUCT WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION, OR ORDINANCE? (DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$5 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(2) YOUR WORK WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give in Item 12 for each case, (1) approximate date, (2) charge, (3) place, (4) action taken.			B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(1) YOUR CONDUCT WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give dates of and reasons for such debarment in Item 12.			(2) YOUR WORK WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			If your answer to A, B, or C is "Yes," give details in Item 12 as fully as you can remember, including the name and address of employer, approximate date, and reasons in each case.		

12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply.)

ITEM NO.	ANSWER	ITEM NO.	ANSWER

INSTRUCTIONS TO APPOINTING OFFICER—You must determine that this appointment would be in accordance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment. This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET
(When Filled In)

16

QUALIFICATIONS UPDATE							
READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS							
<p>Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 445, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13, Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.</p>							
SECTION I BIOGRAPHIC AND POSITION DATA							
EMP. SER. NO. 027630		NAME (Last-First-Middle) Hidalgo, Balmes N. Jr.			DATE OF BIRTH 05/27/19		
SECTION II EDUCATION							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED La Salle Academy		ADDRESS (City State Country) NYC NY		YEARS ATTENDED (From To) 1938-1940		GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT		YEARS ATTENDED FROM-TO		DEGREE RECEIVED	
		MAJOR MINOR				YEAR RECEIVED	
1. NY University		Comm Law		1943-45		NO	
UNIV of MD		Fire engineering		1968		No Credit Course	
2. Mont Jr College		Real Estate Procedures		1968		No Credit Course	
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM TO		NO. OF MONTHS	
Suburban Hospital		Emergency Room procedures		1968		3(?)	
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM TO		NO. OF MONTHS	
1. Non-Com leadership school				1947		?	
SECTION III MARITAL STATUS							
1. PRESENT STATUS (Single Married, Widowed Separated Divorced Annulled Remarried) SPECIFY. MARRIED							
2. NAME OF SPOUSE		(Last)		(First)		(Middle)	
		HIDALGO		Veronica		Waylonia	
3. DATE OF BIRTH		4. PLACE OF BIRTH (City State Country)					
23 May 14		DuBois, Pa, USA					
5. OCCUPATION		6. PRESENT EMPLOYER					
Train Asst		CIA					
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED			
US		N/A		Birth			
SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE							
NAME		RELATIONSHIP		DATE AND PLACE OF BIRTH		CITIZENSHIP	
PERMANENT ADDRESS							
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		1945 NYC NY		US	
		Arlington, Va					
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		1950 NYC NY		US	
		Alexandria Va					
		Mother		1892 SECRET SPAIN		US	
		Rockville MD					

FORM 444a
2-68

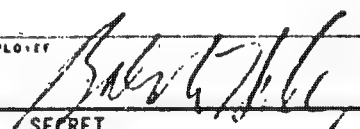
ADD

SECRET

(16-51)

SECRET

(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	KNOWLEDGE ACQUIRED BY (CHECK ONE)			
				SELF-DEVELOP	TRAVEL	STUDY	ASSIGNED WORK
Havana, Cuba	Language, customs, people	1919-25		X			X
Rep. of Panama	"	1952-58	Dec 20	X	X		X
El Salvador, Mexico	"	various		X	X		X
Guatemala, Puerto Rico	"	various		X	X		X
SECTION VI Hawaii	TYPING AND STENOGRAPHIC SKILLS						
1. TYPING (WPM) 2. SHORTHAND (WPM)		3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM					
		<input type="checkbox"/> CRECC <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:					
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				N/A			
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
N/A				N/A			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD					
NONE							
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION N/A				6. RESERVE UNIT TO WHICH N/A ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED			
Non-Com leadership school		same		1977			
						PRESIDENT	
						AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP		
					FROM TO		
American Red Cross		Silver Spring Md			1964 present		
Rockville Fire Dept and OTHERS		(presently Rockville, Md)			1958 present		
International Rescue & 1st Aid Assoc		worldwide			1956(?) present		
Montgomery Board of Realtors (ASSOCIATE member) (Permanency pending)					1958 present		
3.							
SECTION X REMARKS							
I am a bit hazy on the dates.							
DATE		SIGNATURE OF EMPLOYEE					
19 Dec 68							

SECRET

SECRET

When Filled In

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	FAMILY & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Cuba	Area and people/Lan.	1919-1924	Family	X		X	X
Panama	Area and people/Lan	1952-58	Family	X	X	X	X
Dom Rep	Area and People/Lan	1965			X		X
Salvador & Guat	" "	1961-2-3			X		X

SECTION VI & Mexi TYPING AND STEGNOGRAPHIC SKILLS	
1. TYPING (WPM)	2. SHORTHAND (WPM)
3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM	
<input type="checkbox"/> CREGG	<input type="checkbox"/> SPEEDWRITING
<input type="checkbox"/> STENO TYPE	<input type="checkbox"/> OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS	
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED	
Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Copman duties. SOME Real Estate knowledge.	

SECTION VIII MILITARY SERVICE	
CURRENT DRAFT STATUS	
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION
<input type="checkbox"/> YES <input type="checkbox"/> NO	See age.
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON
MILITARY RESERVE, NATIONAL GUARD STATUS	
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG	
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD	<input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK
N/A	N/A
3. EXPIRATION DATE OF CURRENT OBLIGATION	
N/A	
4. CHECK CURRENT RESERVE CATEGORY	5. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (ACTIVE) <input type="checkbox"/> STANDBY (PASSIVE) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED	N/A
6. MILITARY MOBILIZATION ASSIGNMENT	
N/A	
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)	
NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION
Non-Com leadership school	Infantry
1943	

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS	
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)
DATE OF MEMBERSHIP	
FROM	TO
Rockville Fire Dept & others	Rockville Md & others
1958	present
Red Cross as Emergency transport and	
First Aid Instructor as well as Md Corpman	
Associate member Mont Realtors	
Int Assoc Rescue & First Aid	
1964	
1968	
1964	

SECTION X REMARKS	
<p>Re Section IV: Both daughters now married.</p> <p>Re Section III: This is second marriage.</p> <p>Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.</p>	

DATE	SIGNATURE OF EMPLOYEE
25 Nov 68	<i>[Signature]</i>

SECRET

SECRET
(When Filled In)

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I										BIOGRAPHIC AND POSITION DATA									
EMP. SER. NO.		NAME (Last-First-Middle)						DATE OF BIRTH											
027630		Hidalgo, Balmes N.						05/27/19											
SECTION II										EDUCATION									
HIGH SCHOOL																			
LAST HIGH SCHOOL ATTENDED				ADDRESS (City, State, Country)				YEARS ATTENDED (From-To)		GRADUATE									
La Salle Academy				NY City NY				1938-40		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
COLLEGE OR UNIVERSITY STUDY																			
NAME AND LOCATION OF COLLEGE OR UNIVERSITY				SUBJECT		YEARS ATTENDED FROM-TO		DEGREE RECEIVED		YEAR RECEIVED		NO. SEM/ QTR HRS. (Specify)							
				MAJOR		MINOR													
1. New York University				Comm Law Import-Export procedures		1943/45		NO											
2.																			
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.																			
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS																			
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION				FROM		TO		NO. OF MONTHS							
University of Md. College of Engineering				Fire Service extension				Jan 66		Aug 66		8							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE																			
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION				FROM		TO		NO. OF MONTHS							
1. Montgomery Junior College Rockville, Md Campus				Real Estate procedures				Oct 1968				1							
2. Suburban Hospital Bethesda, Md				Emergency Medical Aid/ Maryland State Corpman				Jan-May 1968				5							
SECTION III																			
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: Married																			
2. NAME OF SPOUSE (Last) (First) (Middle) (maiden)																			
HIDALGO Veronica W. (WAYLONIS)																			
3. DATE OF BIRTH				4. PLACE OF BIRTH (City, State, Country)															
May 29 1914				DuBois, Pa., USA															
5. OCCUPATION				6. PRESENT EMPLOYER															
Admin Asst				C.I.A.															
7. CITIZENSHIP				8. FORMER CITIZENSHIP(S) COUNTRY(IES)				9. DATE U.S. CITIZENSHIP ACQUIRED											
US				N/A				Birth											
SECTION IV																			
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE																			
NAME		RELATIONSHIP		DATE AND PLACE OF BIRTH		CITIZENSHIP		PERMANENT ADDRESS											
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		NYC NY - Feb 23/50		US		Alexandria Va											
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		NYC NY - Jan 6/45		US		Arlington Va											

ALSO FIRST AID INSTRUCTIONS cover of Form 7-486

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OFFICIAL USE ONLY (until 6-2-64)

LLC

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING TYPE OR PRINT AVOID USING LIGHT COLORED INKS

SECTION I

BIOGRAPHIC AND POSITION DATA

1 EMP SER NO 027530	2 NAME (Last First Middle) MICALGO B N JR	3 SEX M	4 DATE OF BIRTH 09/27/19	5 SCHEDULE GRADE/STEP GS-12-04
6 SSN D	7 POSITION TITLE CPS OFFICER	8 OFFICE OF ASSIGNMENT AM	9 LOCATION (City, State) WASH., D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
WESTERN HEMISPHERE	PCS-VV	52/05/12	57/12/30
WESTERN HEMISPHERE	TDY-CC	59/01/29	59/02/08
WESTERN HEMISPHERE	TDY-CC	61/02/01	61/03/01
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18
WESTERN HEMISPHERE	PCS-CC	68/04/01	68/05/01
		63/04/01	64/04/01
WESTERN HEMISPHERE	TDY-CC	65/11/11	65/11/11
		THREEEN	11/15

OVERSEAS DATA

CODED 25 APR 1968

DATE: INITIALS:

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NONE	NO COLLEGE DEGREE ON RECORD TWO YEARS - COMMERCIAL LHM IMPORT EXPORT PROGRAM	NYU	1943-45

FORM
167-6442
May 1967

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65-11-11-11 (4511)

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SECTION III							
EDUCATION (Cont'd)							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED		ADDRESS (City, State, Country)		YEARS ATTENDED From To		GRADUATE	
La Salle Academy		NYC NY		1938-40		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR HRS. Specify	
	MAJOR	MINOR					
1 NYU - NYC NY	Comm. Law	Export laws	Sept 43 to ? 45	No		???	
2							
3							
4							
5 IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE, INDICATE SUBJECT, DATE OF A WRITTEN THESIS, AND DATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-top: 10px;"> 01012 01012 01012 01012 </div>							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1							
2							
3							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1							
2							
3							
4							
5							
AGENCY-SPONSORED EDUCATION							
Specify which, if any, of the education shown in Section III was Agency sponsored							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1 Full Ops course				During 1958		9	
2 Management Course				1966 One Week			
3							
4							
5							

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SECTION VII			
MILITARY SERVICE			
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		2. SELECTIVE SERVICE CLASSIFICATION ???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS N/A		4. IF DEFERRED, GIVE REASON N/A	
MILITARY SERVICE RECORD (Also Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc., specify) Army		2. BRANCH OR CORPS Infantry	
3. DATES OF SERVICE (extended active duty) FROM Oct 1940 TO Sept 1943			
4. STATUS (Regular, Reserve, etc., specify) Federalized National Guard		5. RANK, GRADE OR RATE (at separation, if not entered) Cpl.	
6. SERIAL SERVICE OR FILE NUMBER 20249766			
7. CHECK TYPE OF SEPARATION: <input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR AGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input checked="" type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY <input type="checkbox"/> UNDUCE HARDSHIPS <input type="checkbox"/> OTHER (Specify)			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (record the duties and in its which best describe your work or function in the military service) Infantryman; Cryptographic sections; driver.			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG None			
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK	
3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION		4. CHECK CURRENT RESERVE CATEGORY: <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED	
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (record the duties and skills which best describe your work or function in the military service)			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL	FIELD OF SPECIALIZATION	DATE COMPLETED	
1.			<input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
2.			<input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
3.			<input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
4.			<input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
5.			<input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED <input type="checkbox"/> RESERVE <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED

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SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY: CHECK IN			
				RES. DENCE	TRA. &	SUCC.	WORK ASSOC. /MENT
Cuba	Language-Area knowledge	1919-1924	---	X			
Panama	" " "	1952-58		X			X
Puerto Rico	" " "	various			X		X
Guatemala	" " "	various			X		X
El Salvador	" " "	various			X		X
Mexico	" " "	various			X		X
Dom Rep	" Limited area knowledge	1965					X
Germany	" " "	1963					X
Scotland	" " "	1963					X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 40	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK IN APPROPRIATE ITEM <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENO TYPE <input type="checkbox"/> OTHER SPECIFY	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comptometer, mimeograph, card punch, etc.) Various			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. First Aid Instructor. Very active currently. Fire Fighting and safety practices. University of Maryland. Active currently. <i>Shy, Dm - 10 fingers during 1962. Done since.</i>	
2. LIST ALL BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFY. LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS, etc. (e.g., speed, sound & recording, OFFSET PRESS, TURBINE LATHE, ECP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES)	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registration number if known) First Aid Instructor - National Red Cross - 1963	5. FIRST LICENSE, CERTIFICATE (year of issue) 1963 6. LATEST LICENSE, CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit copies unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest, subjects, novels, short stories, etc.)	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NO THEY ARE PATENTED	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	

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SECTION IX		MARITAL STATUS	
1. PRESENT STATUS (Single, Married, Widowed, Separated, Divorced, Annulled, Common Law, etc.)		MARRIED	
2. NAME OF SPOUSE		Veronica WAYLONIS	
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)		
May 23 1914	DuBois, Pa., USA.		
5. OCCUPATION	6. PRESENT EMPLOYER		
Administrative Asst	CIA		
7. CITIZENSHIP	8. FORMER CITIZENSHIP(S) COUNTRY(IES)	9. DATE U.S. CITIZENSHIP ACQUIRED	
US	None	N/A	
SECTION X DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE			
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP
Frances R. Hidalgo	daughter	Feb 23 1950 NYC NY	US
Edmes N. Hidalgo Sr.	father	Dec 15 1890 Puerto Rico	US
Rosa Hidalgo	mother	Jan 12 1892 Spain	US
SECTION XI PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS			
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO
American Red Cross Civil Defense team	Montgomery Ctr., Md.	1964	present
Francconia Volunteer Fire Department	Francconia, Va	1958	1963
Rockville Volunteer Fire Department	Rockville, Md.	1964	present
International Rescue and First Aid Association		1967	present
DATE	SIGNATURE OF EMPLOYEE		
9 Feb 1968	<i>John A. May</i>		

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1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. L.D. NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH	
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)		WRITING (35)		PRONUNCIATION (36)	
SKILL		SPEAKING (37)		UNDERSTANDING (38)		AWARDABLE	
						NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE		DATE		A-M		E-I-M	
				C		R-W-B	
				D-V			
16. AMOUNT OF AWARD		\$		17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO.			
19. STATE/DC TAX DEDUCTION		\$		SIGNATURE			
20. NET AMOUNT OF AWARD		\$		20. CHARGE ALLOTMENT NO.			
21. FORWARD CHECK TO				DATE			
				22. EMPLOYEE PAYROLL NO.			
				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.			
				DATE			

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1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. L.D. NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH	
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)		WRITING (35)		PRONUNCIATION (36)	
SKILL		SPEAKING (37)		UNDERSTANDING (38)		AWARDABLE	
						NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE		DATE		A-M		E-I-M	
				C		R-W-B	
				D-V			
16. AMOUNT OF AWARD		\$		17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO.			
19. STATE/DC TAX DEDUCTION		\$		SIGNATURE			
20. NET AMOUNT OF AWARD		\$		20. CHARGE ALLOTMENT NO.			
21. FORWARD CHECK TO				DATE			
				22. EMPLOYEE PAYROLL NO.			
				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.			
				DATE			

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127 630		LANGUAGE DATA RECORD			
PART I-GENERAL					
1. NAME (Last-First-Middle)		17-24		2. DATE OF BIRTH	
Hidalgo, Balme Nieves JR				MONTH DAY YEAR May 27 1912	
3. LANGUAGE		4. TODAY'S DATE		5.	
Spanish 720		MONTH DAY YEAR May 9 1958		<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS					
SECTION A. Reading (40)					
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.					
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.					
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.					
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.					
5. I HAVE NO READING ABILITY IN THE LANGUAGE.					
SECTION B. Writing (41)					
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.					
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.					
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.					
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.					
5. I CANNOT WRITE IN THE LANGUAGE.					
SECTION C. Pronunciation (42)					
1. MY PRONUNCIATION IS NATIVE.					
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.					
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.					
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.					
5. I HAVE NO SKILL IN PRONUNCIATION.					
CONTINUE ON REVERSE SIDE					

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

- ☒ 1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
- ☐ 2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
- ☐ 3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
- ☐ 4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
- ☐ 5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

- ☒ 1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
- ☐ 2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOES AND PUNS.
- ☐ 3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
- ☐ 4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
- ☐ 5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING — CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

- ☐ 1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
- ☒ 2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
- ☒ 3. BOTH OF THE ABOVE STATEMENTS APPLY.
- ☐ 4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(43). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 May 1958

SIGNATURE

Halmy L. Hildesley

(46)

C

(47)

A

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(When Filled In)

(1-6)		LANGUAGE DATA RECORD			
127630					
PART I-GENERAL					
1. NAME (Last-First-Middle) (17-24)			2. DATE OF BIRTH (75-30)		
Hidalgo, Balnos Nieves JR			MONTH	DAY	YEAR
			May	27	1958
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)		5.	
Portuguese 630		MONTH	DAY	YEAR	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
		May	9	1958	
PART II-LANGUAGE ELEMENTS					
SECTION A. Reading (40)					
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.					
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.					
<input checked="" type="radio"/> 3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.					
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.					
5. I HAVE NO READING ABILITY IN THE LANGUAGE.					
SECTION B. Writing (41)					
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.					
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.					
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.					
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.					
<input checked="" type="radio"/> 5. I CANNOT WRITE IN THE LANGUAGE.					
SECTION C. Pronunciation (42)					
1. MY PRONUNCIATION IS NATIVE.					
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.					
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.					
<input checked="" type="radio"/> 4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.					
<input checked="" type="radio"/> 5. I HAVE NO SKILL IN PRONUNCIATION.					
CONTINUE ON REVERSE SIDE					

CONTINUATION OF PART II—LANGUAGE ELEMENTS	
SECTION D.	Speaking (43)
1.	I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2.	I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3.	I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4.	I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5.	I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.
SECTION E.	Understanding (44)
1.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOSES AND PUNS.
3.	I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4.	I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5.	I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.
BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.	
PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)	
1.	I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2.	I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3.	BOTH OF THE ABOVE STATEMENTS APPLY.
4.	NONE OF THE ABOVE STATEMENTS APPLY.
PART IV—CERTIFICATION	
<p>I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1(C)(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.</p>	
DATE SIGNED <div style="font-family: cursive; font-size: 1.2em;">9 May 1958</div>	SIGNATURE <div style="font-family: cursive; font-size: 1.2em;">J. Salas, J. Velazquez</div>
1401	1471

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balnes Hieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

☐ A personal interview in the Office of Security must be arranged.

☒ A personal interview is not necessary.

☐ Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne

W. A. Osborne

Chief, Personnel Security Division

CONFIDENTIAL
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : 65077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT :  Hedwige R. N. Jr.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Oper-

ations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

☐ A personal interview in the Office of Security must be arranged by your office.

☒ A personal interview is not necessary.

☐

W. A. Osborne

W. A. Osborne

CHIEF, PERSONNEL SECURITY DIVISION OS

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

**YOUR
REFERENCE:**

CASE NO. : 65077

TO : Director of Personnel

FROM : Director of Security

SUBJECT : HIDALGO, Balma Nieves

1. This is to inform you of security approval of the subject person as follows:

- ☒ Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.
- ☐ Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

- ☒ A personal interview in the Office of Security must be arranged.
- ☐ A personal interview is not necessary.
- ☒ This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

W. M. Knott
W. M. Knott
Chief, Personnel Security Division

SECRET

BIOGRAPHIC INFORMATION

Name: Raimon E. HIDALGO, Jr.
Grade: GS-11
Service Designation: CI

Date and Place of Birth: 27 May 1919
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1945-46 New York University - No degree (2 yrs)
Nov 45-Dec 49 FBI, Eastern part of United States -
Undercover Agent

Languages: Spanish - Fluent
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/AH/
HYPOTHESIS, [redacted]
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/AH,
HYPOTHESIS, [redacted]

CIA Training: Covert training

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(When Filled In)

<p>INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.</p>			
<p>NAME OF EMPLOYEE (Last) (First) (Middle)</p> <p><i>HIDALGO VA BALMES NIEVES</i></p>			
<p>1. RESIDENCE DATA</p>			
<p>PLACE OF RESIDENCE WHEN APPOINTED</p> <p><i>D.C.</i></p>		<p>LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)</p>	
<p>PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE</p> <p><i>D.C.</i></p>			
<p>2. MARITAL STATUS</p>			
<p>CHECK (X) ONE: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED</p>			
<p>IF MARRIED, INDICATE PLACE OF MARRIAGE</p> <p><i>BELZONI MISS. USA</i></p>			<p>DATE OF MARRIAGE</p> <p><i>9 APR 1943</i></p>
<p>IF DIVORCED, PLACE OF DIVORCE DECREE</p>			<p>DATE OF DECREE</p>
<p>IF WIDOWED, INDICATE PLACE SPOUSE DIED</p>			<p>DATE SPOUSE DIED</p>
<p>IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE REASON(S) FOR TERMINATION, AND DATE(S)</p>			
<p>3. MEMBERS OF FAMILY</p>			
<p>NAME OF SPOUSE</p> <p><i>LOUISE HIDALGO</i></p>		<p>ADDRESS (No., Street, City, Zone, State)</p>	
<p>TELEPHONE NUMBER</p>			
<p>NAMES OF CHILDREN</p> <p><i>LUZ MARIA</i> <i>FRANCES REBECCA</i></p>		<p>ADDRESS</p>	
<p>SEX <i>F</i></p> <p>AGE <i>13</i></p>			
<p>NAME OF FATHER (Or male guardian)</p> <p><i>BALMES N HIDALGO</i></p>		<p>ADDRESS</p>	
<p>TELEPHONE NUMBER</p>			
<p>NAME OF MOTHER (Or female guardian)</p> <p><i>ROSE HIDALGO</i></p>		<p>ADDRESS</p>	
<p>TELEPHONE NUMBER</p>			
<p>WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES?</p> <p><i>WIFE</i></p>			
<p>4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY</p>			
<p>NAME (Mr., Mrs., Miss) (Last-First-Middle)</p> <p><i>HIDALGO LOUISE</i></p>		<p>RELATIONSHIP</p> <p><i>WIFE</i></p>	
<p>HOME ADDRESS (No., Street, City, Zone, State)</p>		<p>HOME TELEPHONE NUMBER</p>	
<p>BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE</p>		<p>BUSINESS TELEPHONE & EXTENSION</p>	
<p>IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>			
<p>IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>			
<p>DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>			
<p>THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.</p>			
<p>5. VOLUNTARY ENTRIES</p>			
<p>INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS</p> <p><i>GREENWICH SAVINGS BANK</i></p>			
<p>CONTINUED ON REVERSE SIDE</p>			
<p>CURRENT RESIDENCE AND DEPENDENCY REPORT</p>			

CONFIDENTIAL
(When Filled In)

5. (CONTINUED)		
IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?		
JAMES W. HIGHLANDER FOR LOUISE HIGHLANDER		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", WHERE IS DOCUMENT LOCATED?		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
DO NOT NOTIFY OTHER PERSONS IN ITEM 3 OF EMERGENCY. <u>UNLESS</u> WIFE IS NOT AVAILABLE.		
SIGNED AT	DATE	SIGNATURE
		<i>James W. Highlander</i>

CONFIDENTIAL

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for leave purposes and retention credits for reduction in force. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT

PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE

1. NAME (Last, first, middle initial)		2. DATE OF BIRTH		3. RETENTION GROUP						
HIDALGO JR, BALMIES NIEVES		27 MAY 1919								
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service).				10. CSC STATUS (For permanent employees only) <input type="checkbox"/> YES <input type="checkbox"/> NO						
NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN	11. SERVICE		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY
US ARMY, DEPT OF DEFENSE QUARTERMASTER CORP	51	1	12				Permanent	7	2	6
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."										
BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.?)			
	YEAR	MONTH	DAY	YEAR	MONTH	DAY				
US ARMY INF	1953	MAR	27	43	SEPT	21	HONORABLE	4	5	25
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.										
TYPE IF KNOWN (LWOP, Paid, Susp, AWOL, Mer Mer)	FROM—			TO—			TOTAL			
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS	
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)										
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNREMARKED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.										

(DATE) _____ (SIGNATURE) Julius G. Hidalgo
Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C.
(MONTH) (CITY) (STATE)

SEAL

Betty A. Bussard

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

(OVER)

75-58880-4

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS

58	3	17
11	8	1
46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction
in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)

(Enter as the "service computation date" on the employee's "Service Record Card," SF-7)

YEARS	MONTHS	DAYS

REMARKS:

WIN

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

7/24/75

10-10-59 27-10-59 28-10-59 29-10-59 30-10-59 31-10-59

1980

[The page contains extremely faint, illegible text, likely bleed-through from the reverse side. The text appears to be organized into several paragraphs.]

RECORDS OF DEPENDENTS (Continued)			
1712	1940	1940	1940
1713	1940	1940	1940
1714	1940	1940	1940
1715	1940	1940	1940
1716	1940	1940	1940
1717	1940	1940	1940
1718	1940	1940	1940
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1794	1940	1940	1940
1795	1940	1940	1940
1796	1940	1940	1940
1797	1940	1940	1940
1798	1940	1940	1940
1799	1940	1940	1940

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 1, 1861. It is a very important document, as it is the first official communication of the new President to the new Congress. The letter is written in a very formal and dignified style, and it contains a great deal of information about the state of the Union at that time.

2. The second part of the document is a report from the Secretary of the Treasury, dated January 1, 1861. It is a very important document, as it contains a great deal of information about the state of the Treasury at that time. The report is written in a very formal and dignified style, and it contains a great deal of information about the state of the Treasury at that time.

3. The third part of the document is a report from the Secretary of the Interior, dated January 1, 1861. It is a very important document, as it contains a great deal of information about the state of the Interior at that time. The report is written in a very formal and dignified style, and it contains a great deal of information about the state of the Interior at that time.

4. The fourth part of the document is a report from the Secretary of the War, dated January 1, 1861. It is a very important document, as it contains a great deal of information about the state of the War at that time. The report is written in a very formal and dignified style, and it contains a great deal of information about the state of the War at that time.

5. The fifth part of the document is a report from the Secretary of the Navy, dated January 1, 1861. It is a very important document, as it contains a great deal of information about the state of the Navy at that time. The report is written in a very formal and dignified style, and it contains a great deal of information about the state of the Navy at that time.

UNITED STATES DEPARTMENT OF JUSTICE

DECLARATION OF INTENT TO NATURALIZE
I, John Doe, do hereby declare my intention to become a citizen of the United States.
I was born on 11 Dec 1917 at St. Louis, Missouri.
I am of legal age and of sound mind and memory.
I am not married, single, divorced, or widowed.
I am not a member of any foreign government or political party.
I am not a member of any organization that advocates the overthrow of the government of the United States.
I am not a member of any organization that advocates the commission of any crime.
I am not a member of any organization that advocates the commission of any act that is prohibited by the laws of the United States.

DECLARATION BY BLOOD, MARRIAGE OR ADOPTION OF PERSONS WHO ARE NOT CITIZENS OF THE UNITED STATES

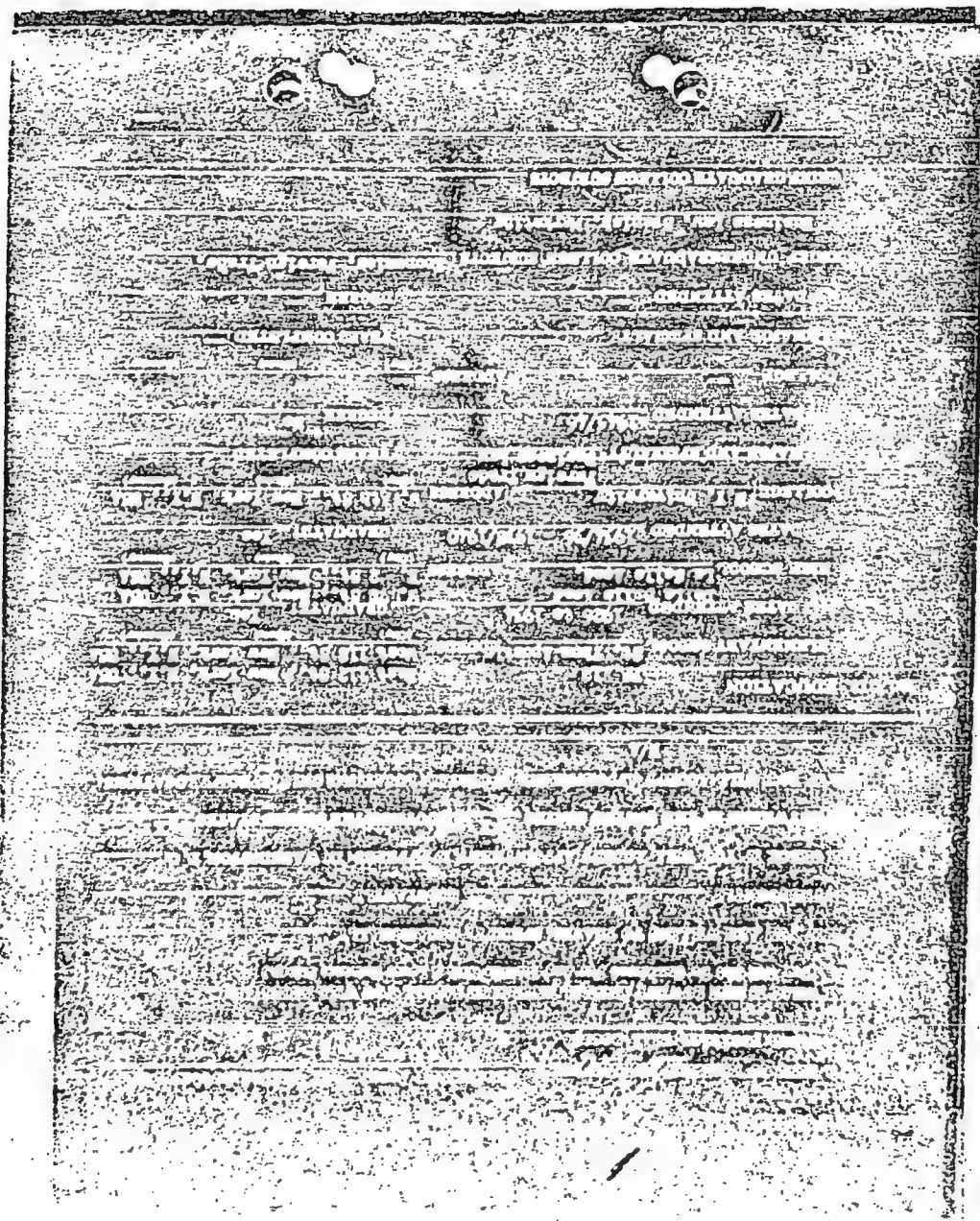
I, John Doe, do hereby declare my intention to become a citizen of the United States.
I was born on 11 Dec 1917 at St. Louis, Missouri.
I am of legal age and of sound mind and memory.
I am not married, single, divorced, or widowed.
I am not a member of any foreign government or political party.
I am not a member of any organization that advocates the overthrow of the government of the United States.
I am not a member of any organization that advocates the commission of any crime.
I am not a member of any organization that advocates the commission of any act that is prohibited by the laws of the United States.

DECLARATION BY BLOOD, MARRIAGE OR ADOPTION OF PERSONS WHO ARE NOT CITIZENS OF THE UNITED STATES

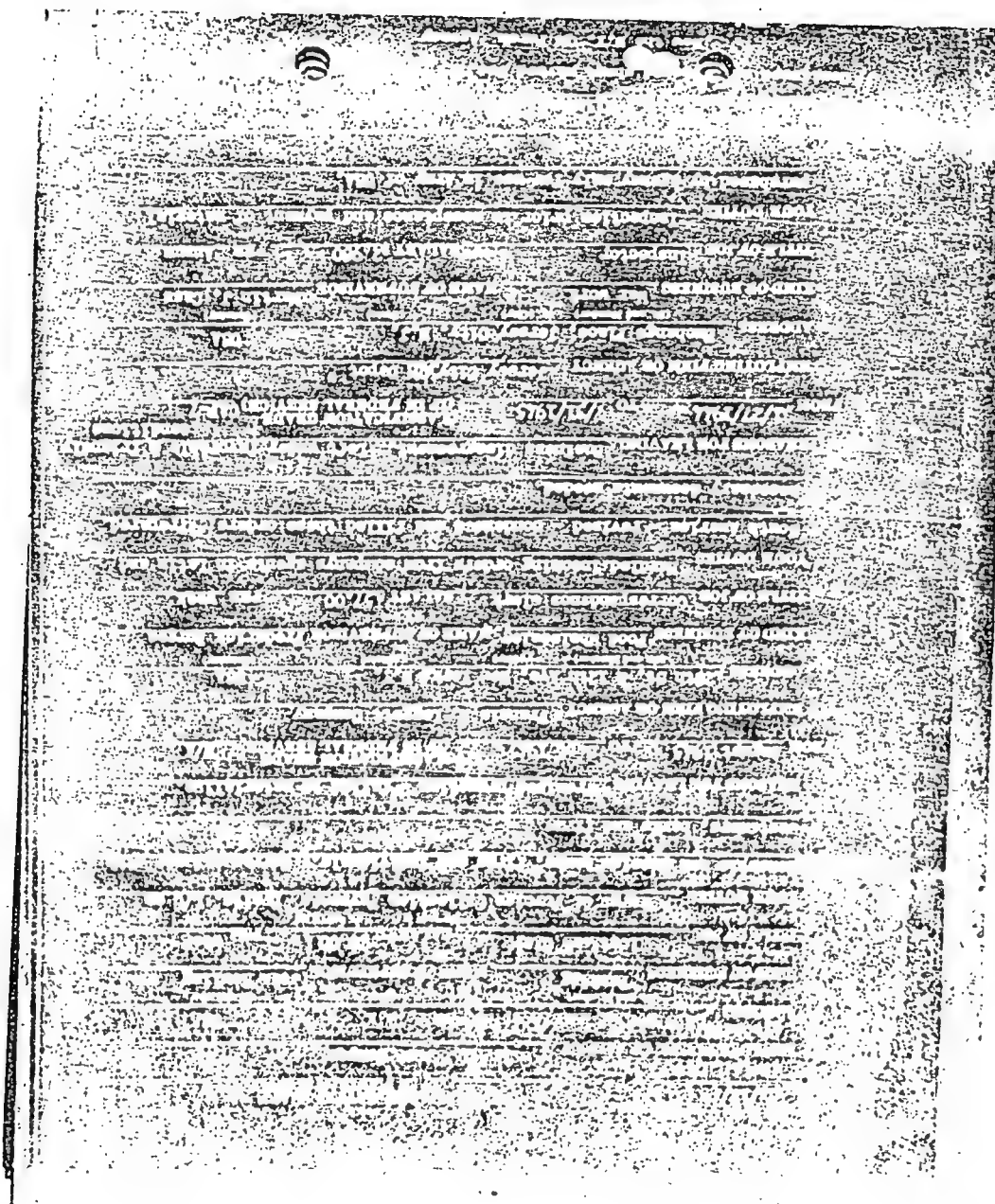
I, John Doe, do hereby declare my intention to become a citizen of the United States.
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I am not a member of any organization that advocates the overthrow of the government of the United States.
I am not a member of any organization that advocates the commission of any crime.
I am not a member of any organization that advocates the commission of any act that is prohibited by the laws of the United States.

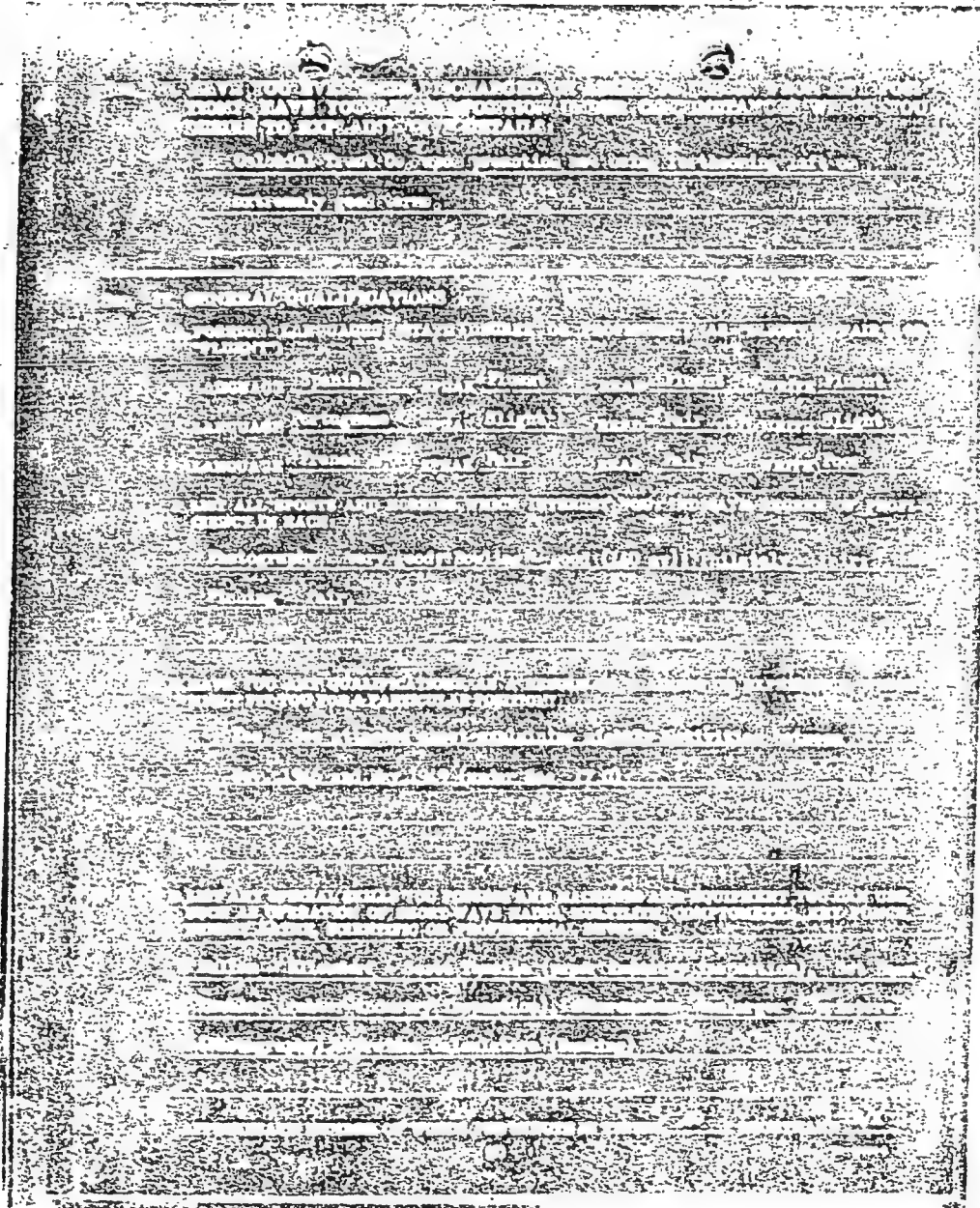
DECLARATION BY BLOOD, MARRIAGE OR ADOPTION OF PERSONS WHO ARE NOT CITIZENS OF THE UNITED STATES

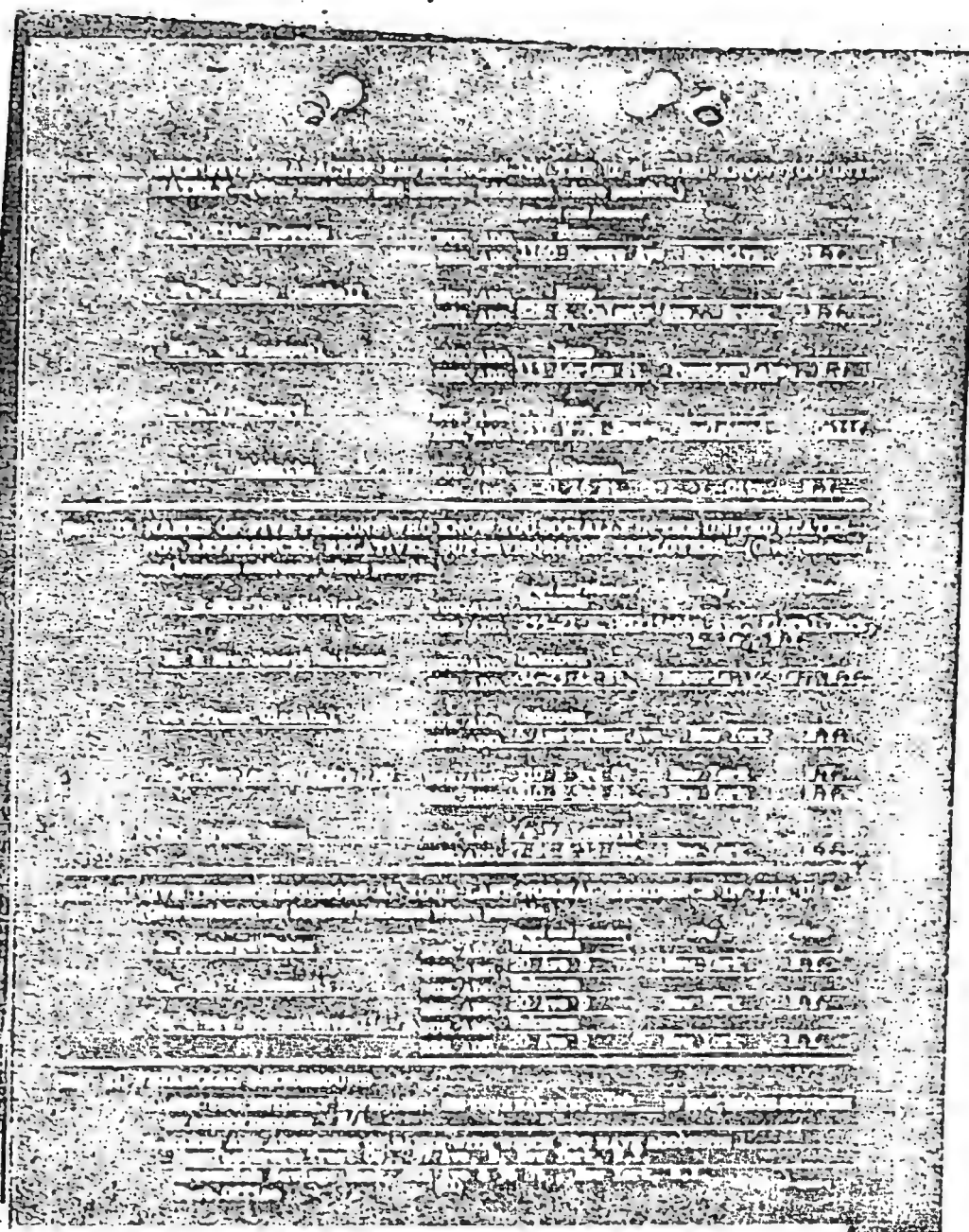
I, John Doe, do hereby declare my intention to become a citizen of the United States.
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I am of legal age and of sound mind and memory.
I am not married, single, divorced, or widowed.
I am not a member of any foreign government or political party.
I am not a member of any organization that advocates the overthrow of the government of the United States.
I am not a member of any organization that advocates the commission of any crime.
I am not a member of any organization that advocates the commission of any act that is prohibited by the laws of the United States.

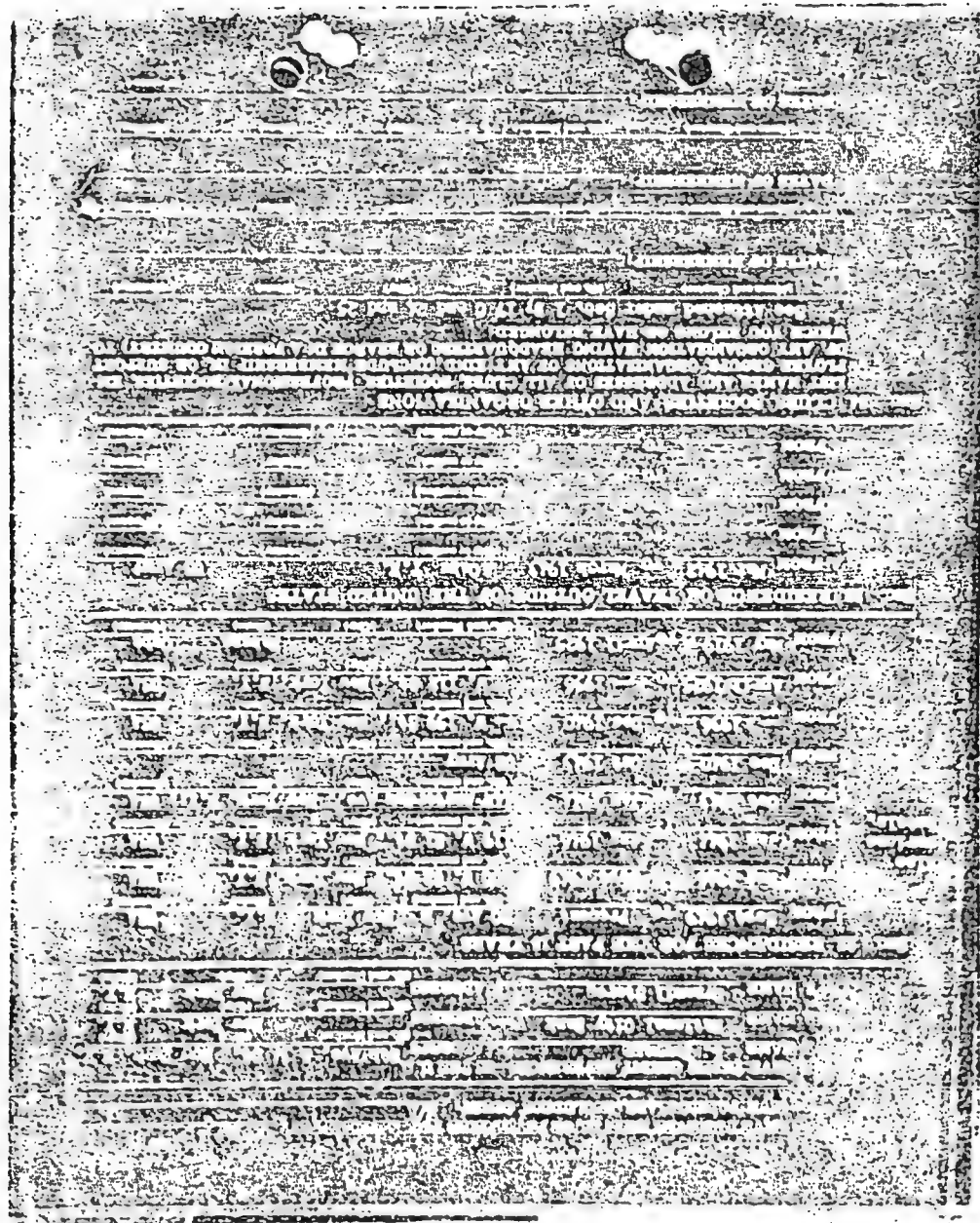


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THE UNITED STATES OF AMERICA
 DISTRICT OF COLUMBIA
 DEPARTMENT OF JUSTICE
 OFFICE OF THE ATTORNEY GENERAL
 DIVISION OF INVESTIGATION
 MEMORANDUM FOR THE RECORD
 SUBJECT: [Illegible]
 DATE: [Illegible]
 BY: [Illegible]

THE NEW YORK PUBLIC LIBRARY
ASTOR LENOX TILDEN FOUNDATIONS
455 FIFTH AVENUE
NEW YORK 17, N.Y.

[illegible]

1992

1990

RECEIVED

POUNCEBURY **GRANDVIEW**

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THE UNIVERSITY OF CHICAGO PRESS

7-10-1964

SECRET

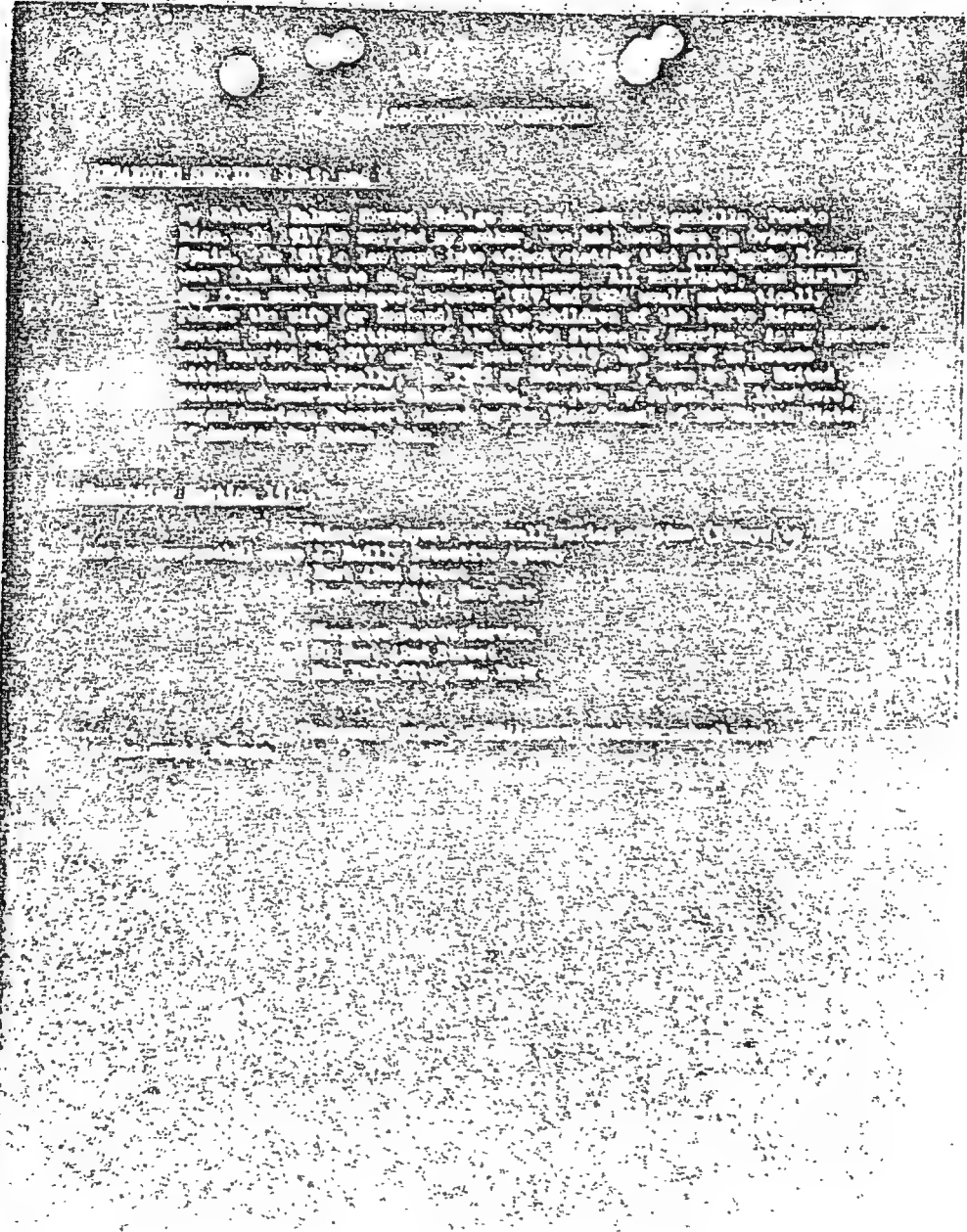
THE UNIVERSITY OF CHICAGO PRESS

CONSTITUTIONAL PROVISIONS

1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

100-443887-100

[illegible]



1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

[illegible]

A black and white photograph of a handwritten musical score on aged, yellowed paper. The score is written in dark ink and consists of two staves. The notation includes various musical symbols such as notes, rests, and bar lines. The paper shows signs of wear, including creases and discoloration.

[The page contains faint, illegible handwritten notes.]

[Faint, illegible handwriting]

1. The first step in the process is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

APPROVED FOR RELEASE BY THE NATIONAL ARCHIVES

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? _____

(Yes or No)

Sec. 1. PERSONAL BACKGROUND

A. FULL NAME Mr. Ealmes Nieves Hidalgo, Jr.
(U.S. Name) (First) (Middle) (Last)

Telephone:

Office NA

Ext. NA

Home NA

PRESENT ADDRESS House number 60, 94th St., East,
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bal" **WHAT OTHER NAMES HAVE YOU USED?** See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE

NAMES? See remarks

HOW LONG? See remarks **IF A LEGAL CHANGE, GIVE PARTICULARS.**

No

(Where:)

(By what authority?)

C. DATE OF BIRTH 27 May 1919 **PLACE OF BIRTH** Havana, Cuba
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. **BY BIRTH?** NA **BY MARRIAGE?** NA
(Country)

BY NATURALIZATION CERTIFICATE NO. NA **ISSUED** NA **BY** NA
(Date) (Country)

AT See remarks
(City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? No
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? NA **TO** NA **ANY OTHER NATIONALITY?** NA
(Country)

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? No **GIVE PARTICULARS:**

NA

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924

PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.

LAST U. S. VISA None
(Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9" WEIGHT 145
EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin
BUILD slight OTHER DISTINGUISHING FEATURES Mole, Upper left lip.

SEC. 3. MARITAL STATUS

A. SINGLE ☐ MARRIED ☒ DIVORCED ☐ WIDOWED ☐

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Beier Hidalgo
(First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943

~~WIFE~~ (HER) ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA
(St. and Number) (City) (State) (Country)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)

OCCUPATION File Clerk LAST EMPLOYER Classified

EMPLOYER'S OR BUSINESS ADDRESS Classified
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

NA

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME Luz Maria Hidalgo RELATIONSHIP Daughter AGE 12
 CITIZENSHIP U. S. ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

2. NAME Frances Rebecca Hidalgo RELATIONSHIP Daughter AGE 7
 CITIZENSHIP U. S. ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

(also dependent)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Baldes Reyes Hidalgo
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE NA

PRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

DATE OF BIRTH December 1920 PLACE OF BIRTH Aguadilla, Puerto Rico
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? Puerto Rico
(City) (State) (Country)

OCCUPATION Retired LAST EMPLOYER Do not remember

EMPLOYER'S OR OWN BUSINESS ADDRESS None
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Frances Basario Hidalgo
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 12 Jan. 1892 PLACE OF BIRTH Oviedo, Spain

CITIZENSHIP U. S. WHEN ACQUIRED? Marriage 1917 WHERE? Havana, Cuba
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Lascinski
EMPLOYER'S OR OWN BUSINESS ADDRESS 48 St. NYC, NY
(St. and Number) (City) (State) (Country)
MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME (First) (Middle) (Last) AGE
PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
2. FULL NAME (First) (Middle) (Last) AGE
PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
3. FULL NAME (First) (Middle) (Last) AGE
PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
4. FULL NAME (First) (Middle) (Last) AGE
PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
5. FULL NAME (First) (Middle) (Last) AGE
PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME Henry B. Ecier
(First) (Middle) (Last)
LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
PRESENT, OR LAST, ADDRESS 210 California Avenue, Ioland, Mississippi, USA
(St. and Number) (City) (State) (Country)
DATE OF BIRTH 1895 PLACE OF BIRTH USA
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)
OCCUPATION Lawyer LAST EMPLOYER Unknown

SEC. 9. MOTHER-IN-LAW

FULL NAME Erma Rebecca Peior
(First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
 PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA
(St. and Number) (City) (State) (Country)
 DATE OF BIRTH 1893 PLACE OF BIRTH USA
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
 CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.
(City) (State) (Country)
 OCCUPATION Housewife LAST EMPLOYER NA

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

See
remarks

1. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

NONE

1. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR See covering dispatch reference

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$5390.00 P/A
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY Yes
FREQUENTLY CONSTANTLY X

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. X
ANYWHERE IN THE UNITED STATES X OUTSIDE THE UNITED STATES X

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:
.....

SEC. 13. EDUCATION

ELEMENTARY SCHOOL St. Thomas Apostolic ADDRESS NYC NY USA
(City) (State) (Country)
DATES ATTENDED 1926-1934 GRADUATE? Yes

HIGH SCHOOL La Salle Academy ADDRESS 2nd St. and 2nd Avenue NYC, NY USA
(City) (State) (Country)
DATES ATTENDED 1936-1940 GRADUATE? Yes

COLLEGE NY University ADDRESS Washington Square, NYC, NY, USA
Foreign Trade and (City) (State) Two (Country)
MAJOR AND SPECIALTY Business Law YEARS COMPLETED School

DATES ATTENDED 1944-1945 DEGREE No

COLLEGE ADDRESS (City) (State) (Country)
MAJOR AND SPECIALTY YEARS COMPLETED
DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS

CHIEF GRADUATE COLLEGE SUBJECTS

Sec. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S. Army Cpl. 1940-1943
(Country) (Service) (Rank) (Date of Service)
Camp Hale, Colorado 202 149766 Honorable
(Last Station) (Postal Number) (Type of Discharge)
 REMARKS: None
 Do not remember
 SELECTIVE SERVICE BOARD NUMBER ADDRESS
 IF DEFERRED GIVE REASON NA
 INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS NA

Sec. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952 TO Present CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-11
 EMPLOYING FIRM OR AGENCY See covering dispatch reference
 ADDRESS See covering dispatch reference
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR See covering dispatch
 TITLE OF JOB See covering dispatch SALARY \$6390.00 PER annum
 YOUR DUTIES See covering dispatch reference

REASONS FOR LEAVING
 FROM January 1951 TO February 1952 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-7
 EMPLOYING FIRM OR AGENCY NY Q3 Procurement Agency
 ADDRESS 111 East 16th Street NYC, NY, USA
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR Do not remember
 TITLE OF JOB Inspector SALARY \$3525.00 PER annum
 YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically the U. S. Army.
 REASONS FOR LEAVING To obtain present position.

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work.

REASONS FOR LEAVING Promised promotion failed to materialize.

FROM August 1945 TO September 1947 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale NAME OF SUPERVISOR Do not remember
Grocery house.

TITLE OF JOB Correspondence clerk SALARY \$ 57.00 PER week

YOUR DUTIES Export correspondence clerical duties.

REASONS FOR LEAVING Disatisfied with type of work.

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish..... SPEAK Fluent..... READ .. Fluent... WRITE ... Fluent..

LANGUAGE Portuguese .. SPEAK Slight..... READ Fair..... WRITE Slight..

LANGUAGE SPEAK READ WRITE

B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank.....

Photography - Very good degree of proficiency.....

Bowling - Fair degree of proficiency.....

Philately - Fair degree of proficiency.....

Fishing (no comment).....

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes, See covering dispatch reference.....

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.....

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 30..... SHORTHAND 0.....

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE No

FIRST LIC. OR CERTIFICATE (YR) LATEST LIC. OR CERTIFICATE (YR)

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. Edward Lee Anderson	BUS. ADD. See Dispatch reference.		
	RES. ADD.		
2. Willard Galbraith	BUS. ADD.		
	RES. ADD.		
3. Homer Neal	BUS. ADD.		
	RES. ADD.		
4. Andres Rivera	BUS. ADD.		
	RES. ADD.		
5. Joseph Sancho	BUS. ADD.		
	RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. _____	BUS. ADD. _____		
	RES. ADD. _____		
2. _____	BUS. ADD. _____		
	RES. ADD. _____		
3. _____	BUS. ADD. _____		
	RES. ADD. _____		
4. _____	BUS. ADD. _____		
	RES. ADD. _____		
5. _____	BUS. ADD. _____		
	RES. ADD. _____		

See
remarks

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. _____	BUS. ADD. _____		
	RES. ADD. _____		
2. _____	BUS. ADD. _____		
	RES. ADD. _____		
3. _____	BUS. ADD. _____		
	RES. ADD. _____		

See
remarks

SEC. 21. FINANCIAL BACKGROUND

- A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes IF NOT, STATE SOURCES OF OTHER INCOME _____
- B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St. and Broadway and 6th Avenue, NYC, NY.

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No
GIVE PARTICULARS, INCLUDING COURT: _____

D. GIVE THREE CREDIT REFERENCES—IN THE U. S.

1. NAME _____ ADDRESS _____
(St. and Number) (City) (State)
2. NAME None ADDRESS _____
(St. and Number) (City) (State)
3. NAME _____ ADDRESS _____
(St. and Number) (City) (State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM April 1952 TO Present _____
(St. and number) (City) (State) (Country)
FROM 1949 TO 1952 20 Ave. D, NYC, NY, USA
(St. and number) (City) (State) (Country)
FROM 1944 TO 1948 200 West 82nd St., NYC, NY, USA
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and Number) (City) (State) (Country)

SEC. 22 RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 TO 1924 Havana, Cuba Country of birth
(City or section) (Country) (Purpose)
FROM 1942 TO 1943 Pacific area US Army
(City or section) (Country) (Purpose)
FROM 1952 TO Present Republic of Panama Work
(City or section) (Country) (Purpose)
FROM _____ TO _____
(City or section) (Country) (Purpose)
FROM _____ TO _____
(City or section) (Country) (Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____
2. _____
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____
3. _____
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____

4. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

5. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

6. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

7. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

Sec. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: No (See remarks)

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes IF SO, TO WHAT EXTENT? Beer with meals

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

No

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

No

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense

Present Organization

(14)

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1946

This Organisation - 1951

SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Amie Louise Hidalgo RELATIONSHIP wife

ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

No

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Ft. Amador, Canal Zone
(City and State)

DATE 19 July 1957

(Witness)

(Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

14-00000

RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE

July 14 71